

PREA Facility Audit Report: Final

Name of Facility: Algoa Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 06/24/2024

Date Final Report Submitted: 11/04/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 11/04/2024

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	04/16/2024
End Date of On-Site Audit:	04/18/2024

FACILITY INFORMATION	
Facility name:	Algoa Correctional Center
Facility physical address:	8501 No More Victims Road, Jefferson City, Missouri - 6510
Facility mailing address:	

Primary Contact

Name:	Kyle Kempker
Email Address:	kyle.kempker@doc.mo.gov
Telephone Number:	5735368755

Warden/Jail Administrator/Sheriff/Director

Name:	Kelly Morriss
Email Address:	kelly.morriss@doc.mo.gov
Telephone Number:	573-751-3911 ext.201

Facility PREA Compliance Manager

Name:	Kyle Kempker
Email Address:	Kyle.Kempker@doc.mo.gov
Telephone Number:	O: 573-751-3911

Facility Health Service Administrator On-site

Name:	Rhonda Cooper
Email Address:	rhonda.cooper@doc.mo.gov
Telephone Number:	573-751-3911 ext. 56

Facility Characteristics

Designed facility capacity:	1085
Current population of facility:	1071
Average daily population for the past 12 months:	1073
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males

Age range of population:	18-75
Facility security levels/inmate custody levels:	Minimum-Medium
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	264
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	32
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	61

AGENCY INFORMATION

Name of agency:	Missouri Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2729 Plaza Drive, Jefferson City, Missouri - 65109
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102
Telephone number:	5737512389

Agency Chief Executive Officer Information:

Name:	Trevor Foley
Email Address:	Trevor.Foley@doc.mo.gov
Telephone Number:	573-526-6607

Agency-Wide PREA Coordinator Information

Name:	Darren Snellen	Email Address:	darren.snellen@doc.mo.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-04-16
2. End date of the onsite portion of the audit:	2024-04-18

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International was contacted to inquire about correspondence received for ACC. JDI responded with no correspondence received.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1085
15. Average daily population for the past 12 months:	1073
16. Number of inmate/resident/detainee housing units:	10
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1035
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	9
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	84
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	4
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	30

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	5
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	6
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	67
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	200
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	97

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	24
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	20
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmates were selected randomly by dividing the population total at the time of the onsite audit by twenty, then using the number from that result to select inmates from a list by housing unit.

56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	20
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility provided a list of targeted inmates prior to the onsite audit. There were no inmates with cognitive disabilities on the list.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>5</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility provided a list of targeted inmates prior to the onsite audit. There were no inmates that were limited English proficient on the list.
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	3
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	5
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The PCM said there were no inmates placed involuntarily in segregation for being a high risk of victimization or reporting sexual abuse. The staff interviewed that supervises segregation said there were no inmates placed in segregation involuntarily for reporting sexual abuse in the twelve months prior to the onsite audit.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None

73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	15
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☒ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☒ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☐ First responders, both security and non-security staff
- ☐ Intake staff

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Staff Victim Advocate
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.
SITE REVIEW AND DOCUMENTATION SAMPLING	
Site Review	
<p>PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.</p>	
84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Documents were requested for all inmates and staff that were interviewed. Documents were requested for a random selection from a list of staff hired in the last 12 months. Documents were requested for staff selected from the medical staff list. Training documents were requested for eight volunteers randomly selected from the volunteer list.
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY	
Sexual Abuse and Sexual Harassment Allegations and Investigations Overview	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	8	3	8	0
Staff-on-inmate sexual abuse	14	0	14	0
Total	22	3	22	0

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	4	0	4	0
Staff-on-inmate sexual harassment	2	0	2	0
Total	6	0	6	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	3	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	3	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	5	3
Staff-on-inmate sexual abuse	1	5	5	3
Total	1	5	10	6

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	4	0	0	0	0
Staff-on-inmate sexual harassment	1	0	0	0	0
Total	5	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	4	0	0	0
Staff-on-inmate sexual harassment	1	1	0	0
Total	5	1	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

12

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	7
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	5
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	3
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

1

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- ☒ The audited facility or its parent agency
- ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- ☐ A third-party auditing entity (e.g., accreditation body, consulting firm)
- ☐ Other

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment is the policy that provides the zero-tolerance policy, definitions of sexual abuse and sexual harassment, and the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy meets the requirements for this provision of the standard.</p> <p>b) Based on the organization charts provided, the Missouri Department of Corrections has a PREA Coordinator in the Office of Professional Standards who reports to the Director of that division. The Director of OPS then reports to the MODOC Director. This places the PREA Coordinator in an executive-level position that meets the standard.</p> <p>PREA Coordinator Interview – The PREA Coordinator said he has sufficient time and authority to fulfill the duties of the PREA Coordinator for the agency. He oversees the PREA Unit which consists of dedicated investigators and support staff that assist him in managing and monitoring PREA standards compliance and PREA investigation at all</p>

	<p>facilities in the agency. Each facility has a PREA Compliance Manager who reports to him for PREA Compliance matters.</p> <p>c) Document Review – An updated organizational chart was provided for ACC. The PREA Site Coordinator (PREA Compliance Manager) is a Deputy Warden who reports directly to the Warden.</p> <p>PCM Interview – The Deputy Warden said she has the time and authority to complete the requirements of being the PREA Compliance Manager for ACC. He is responsible for monitoring PREA compliance in addition to his other duties as the Deputy Warden of Offender Management. He has assistance from other staff as well.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>It was reported on the PAQ that the Missouri Department of Corrections currently does not contract for the confinement of inmates with a private or other governmental agency. The PREA Coordinator stated in his interview the Missouri DOC is not contracting with anyone for confinement of inmates at this time. A memorandum was provided by the PCM that states the Ozark Correctional Center does not contract for the confinement of inmates.</p>

115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires each facility to “maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse.” “The staffing plan shall consider the facility’s physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.”</p> <p>Document Review – a 2023 Staffing Plan Review document was provided for review. The review of the staffing plan was developed based on generally accepted detention practice, internal and external reviews, a review of blind spots, the composition of the</p>

inmate population, the number of supervisory staff, the programs on each shift, and the prevalence of substantiated and unsubstantiated incidents of sexual abuse. There were no judicial findings, federal investigations, state or local regulations that required adjustments to the staffing plan.

Tour Observations – All areas of the facility were toured including housing units, recreation, medical, food service, education, maintenance, intake clothing issue, paint shop, laundry, and visiting room. Staff were observed in all areas of the facility.

Staffing levels provided appropriate monitoring of inmates in housing units and all program/service areas. Privacy screens in bathrooms did not create blind spots.

Housing units had cells on two floors. A wide stairwell connected the two floors that were covered by cameras and mirrors. Cameras covered the hallway and dayroom in each housing unit. Cameras were observed covering blind spots in recreation rooms, the warehouse, kitchen, classrooms, library, and maintenance shops. Mental health and medical offices where inmates would meet with staff had windows to allow for staff to walk by to observe staff and inmate interaction. Classrooms all had windows to allow for security staff to observe the classrooms during rounds in the hallway.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall comply with the staffing plan on a regular basis, deviations from the staffing plan shall be documented and justification for deviations noted.”

The facility provided a memorandum stating the facility did not drop below the minimum staffing in the last 12 months. There were no deviations from the staffing plan.

Warden Interview – The Warden said he has weekly meetings to monitor the staffing levels and hiring to fill vacancies. He said the facility was at an 8% security staff vacancy rate during the onsite audit. Mandatory posts are covered with overtime when there is a staff absence. He said a housing unit was closed and all of the cameras were redeployed to other areas they identified as needing additional coverage to promote inmate safety. When they complete an annual staffing plan review, it is documented and sent to central administration.

PCM Interview - The PREA Site Coordinator/Deputy Warden said he meets with the Warden and HR for the annual staffing plan review. Staffing is also reviewed throughout the year on a weekly basis. Vacancies are monitored to ensure they are being filled. Deviations from the staffing plan have not occurred in the last year.

Deviations from the staffing plan would be closing mandatory security posts and implementing emergency procedures. Overtime is always utilized to cover a mandatory post due to absences from call-offs.

c) Document Review – The staffing plan review included an evaluation of the video monitoring system and whether additional resources were needed for staffing plan compliance. A memorandum from the PREA Site Coordinator stated a review of the video monitoring system was conducted by him, the Major and an electronics technician. They found no need for additional cameras.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states

	<p>"Each institution shall ensure the classifications of lieutenant or above conduct and document unscheduled and unannounced rounds to identify and deter offender sexual abuse and sexual harassment. Each facility shall ensure that rounds occur periodically in all areas of the facility. Staff members shall be prohibited from alerting other staff members that these rounds are occurring. The rounds shall be documented and readily accessible during audits as outlined in the facility's standard operating procedure." The policy reflects the requirements for this provision of the standard.</p> <p>Document Review – Shift summary reports and housing unit chronological logs were requested for random dates to review for documentation of unannounced rounds. PREA or security rounds were documented during each shift on the dates. Unannounced rounds were conducted by lieutenants and captains on each shift.</p> <p>Intermediate Staff Interview – A Shift Supervisor said he conducts an unannounced round daily in a portion of the facility and covers the whole facility in a week. He said the rounds are documented in the housing unit chronological logs and the shift summary.</p> <p>Random Staff Interviews – All staff interviewed said they saw shift supervisors and assistant shift supervisors making rounds several times per week.</p> <p>Inmate Interviews – Inmates were asked if they see supervisors making rounds. Most said they see sergeants daily. Most inmates said they see captains and lieutenants in the housing unit several times per week.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents, and policies reviewed.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "A youthful offender will not be placed in a housing unit in which he will have sight, sound, or physical contact with any adult offender through use of a shared day room or other common space, shower area, or sleeping quarters in accordance with the institutional services procedure regarding offender housing assignments."</p> <p>A memorandum from the PCM was provided that states Algoa Correctional Center does not house youthful inmates. It was reported on the PAQ that ACC does not house youthful inmates. None of the inmates interviewed were under 18 years of age.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri Department of Corrections policy IS20-1.3 Searches prohibits cross gender strip searches except in exigent circumstances. Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment also prohibits cross-gender strip searches except in exigent circumstances. The facility reported on the PAQ that no cross-gender strip searches occurred in the past 12 months. The policies reflect the requirements of the provision of this standard.</p> <p>The facility reported on the PAQ that there were no cross-gender strip or cross gender visual body cavity searches during the review period. If there were a cross-gender strip search under exigent circumstances, it would be documented on a form 931-4701 per policy.</p> <p>c) Missouri DOC policy IS20-1.3 Searches requires staff to document all cross-gender strip searches on the cross-gender search form. There were no cross-gender strip search forms presented for review. The policy reflects the requirements for this provision of the standard.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders shall be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite-gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with, institutional services, and probation and parole procedures regarding searches.” The policy also requires staff of the opposite-gender to announce their presence prior to entering a housing unit. These announcements are to be logged in the housing unit chronological log. Post orders for each housing unit were provided for review. The post orders required a mandated PREA announcement to be made and documented in the housing unit log when opposite-gender staff begins work in a housing unit or enters when there are no opposite-gender staff in the unit. The policy and post orders reflect the requirements for this provision of the standard.</p> <p>Tour Observations – Opposite-gender staff announcements were observed during the tour. Opposite-gender staff announcements were documented in housing unit logs as PREA Announcements. Signs indicating female staff are on the unit are hung up for hearing impaired inmates. Showers were in gang shower areas with a half wall and door that provided an appropriate modesty screen. In administrative segregation, the showers were in individual stalls with doors that had a solid privacy barrier in the middle of the door. Curtains and solid barriers provided the inmate with enough coverage of private areas without completely blocking staff’s ability to monitor for safety. Toilets were in segregation cells with a small window in the door. Toilets were also in small open bay areas with half walls around them that blocked the view of the toilet but still allowed for staff monitoring. Toilets were in the main bathroom area with a partition wall blocking the view of the toilets at the entrance to the bathroom.</p>

All bathrooms outside of the housing units were in small single toilet rooms with a door that did not lock. Staff monitor access to the inmate bathrooms in shops. There was a toilet room with no door or partition in the education hallway. Female staff could not see the toilet from the hallway without walking into the bathroom unannounced.

Random Staff Interviews – Twelve staff were selected at random from shift rosters for interviews. All staff said they felt like the inmates could shower and use toilet facilities with enough privacy that staff could not see their genitals or buttocks. All staff were aware of the requirement for opposite-gender announcements. All staff said they hear opposite-gender staff make announcements when entering housing units or announcements are made for them.

Document Review – Housing unit logs were requested for random dates in December 2023, January and February 2024. PREA announcements were observed and documented when female staff entered housing units or took over a shift in a housing unit.

Inmate Interviews – Inmates said they hear the announcements for female staff entering the housing unit. Some said the announcement on the PA system can be inaudible, but they see the signs and know it is for female staff being present.

Inmates said they can use the showers and toilets without being seen by female staff in all of the housing units.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not perform strip or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, diagnostic center reception and orientation, and receiving screening intake center.” Missouri DOC policy IS20-1.3 Searches prohibits staff from performing a strip search for the sole purpose of determining an inmate’s gender. The policies reflect the requirements of the provision of this standard. There were

Random Staff Interviews – All staff said they strip searching a transgender inmate solely for determining their genital status was prohibited by policy, not allowed and would be unprofessional.

Inmate Interview – Two inmates who identify as transgender said they had not been strip searched only to determine genital status since being at the facility.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Custody staff members shall be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs.” The policy reflects the requirements for this provision of the standard.

Random Staff Interviews – The staff randomly selected for an interview said they had been trained how to do cross gender pat searches and pat searches of transgender inmates. Female staff said they have done cross gender pat searches of inmates and

	<p>have not conducted any cross-gender strip searches. The search described for transgender inmates was like the search of a female inmate.</p> <p>Inmate Interviews – Some inmates said they have been pat searched by female staff. They felt the search was appropriate and professional. None said they had been subjected to a cross-gender strip search. Two transgender inmates said pat searches by staff were not intrusive and appropriate.</p> <p>Document Review – Search training completion documentation was provided for ten staff hired in the last year.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents, and policies reviewed.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires staff to “provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” LEP inmates will be provided the PREA video transcript and PREA brochure in their native language. If these cannot be translated into their native language, the PREA site coordinator will utilize an interpreter to assist the inmate in understanding the material. “Offender interpreters shall not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.”</p> <p>Intake Staff Interview – Intake staff said the facility has some staff designated as interpreters. He said the facility had an interpretive service by telephone that could be used when staff cannot interpret. The PREA brochure is in Spanish or can be provided in several other languages. If an inmate cannot read, the PREA brochure is read by staff. A video is shown that provides the information through audio for visually impaired inmates and with closed captions for hearing impaired inmates. If an inmate cannot read, He reads the brochure to them. If an inmate cannot hear, he can communicate with them in writing. Inmates with cognitive disabilities will receive the PREA education individually from staff to ensure they understand the material.</p> <p>Random Staff Interviews – The staff interviewed either knew or thought there was an interpretive service the facility could use for LEP inmates. They said the shift supervisor would be notified when it was needed and could access it. They also knew</p>

	<p>there were some staff that could translate a few languages. None of the staff said it would be appropriate to use an inmate to translate for an LEP inmate.</p> <p>Inmate Interviews – There were five inmates with hearing impairment identified by the facility for interview. All five had the ability to hear with hearing aids and could hear my questions. There were two inmates the facility identified as having visual impairment. Both said the staff read the PREA brochure to them and explained how to make reports. There were no limited English proficient inmates to interview at the facility during the onsite audit.</p> <p>The facility meets this standard based on the information from interviews, and policies reviewed.</p>
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115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not hire or promote any person, staff member, or enlist the services of any contractor that may have contact with an offender when it is known that he: a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or c. has been civilly or administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse.”</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background screening, candidate selection, maintenance of employee records, employee discipline, and labor organizations.”</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before hiring new staff members a worksite personnel staff member or designee shall: a. perform a criminal background records check; and b. attempt to contact all prior institutional employers, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background screening.”</p> <p>Human Resource Staff Interview - HR staff said criminal background checks and pre-employment background checks are completed for all new hires and promotions. She</p>

reviews prior discipline issues that would include sexual harassment. Issues with sexual harassment history would be considered in hiring and promotion decisions. If applicants have prior corrections experience, a supervisor calls the prior employer for a pre-employment PREA check to inquire about substantiated sexual abuse investigations or resignations during a sexual abuse investigation. This is all documented on the form by the supervisor.

Document Review - Records were reviewed for fifteen staff hired in the last year. All fifteen had a criminal background check completed prior to their hire date. All applicants are asked on the MODOC application if they have ever worked or volunteered for a prison, jail, lockup, community treatment center, mental health facility, alcohol or drug rehabilitation center, juvenile facility or other correctional facility. If they answer yes, a Pre-Employment PREA Check form is completed by staff that call the prior employer to ask if the applicant has ever had a substantiated sexual abuse or sexual harassment investigation or resigned during an investigation. There were two newly hired staff that had worked at a corrections institution prior to working at Algoa CC. Documentation of the Pre-Employment PREA Check was provided that supported compliance with the standard.

d) Missouri DOC policy D2-2.2 Background Investigations states "Contract staff members, volunteers, and student interns shall have a background investigation conducted that consists of the criminal history check and any violations that have been reported to pertinent professional licensing and/or certification organizations if applicable."

Human Resource Staff Interview - HR staff said criminal background checks are conducted for all contract staff prior to working at the facility. The criminal background checks are conducted by the Warden's Executive Assistant. The completed criminal background checks are retained in the HR office.

Document Review - Criminal background checks were requested for thirteen medical contract staff. Documentation of completed criminal background checks were provided for only three. A second request was sent with the same set of documents that were reviewed being resent to the auditor. The criminal background checks have not been received for review. Completed criminal background checks for the ten selected medical staff must be provided or a new criminal background check must be completed to document compliance with this provision.

e) Missouri DOC policy D2-11.14 Annual Employment Requirements Section III. A requires an annual criminal background check to be completed on the birth month of every employee.

Human Resource Staff Interview - HR staff said she requests a criminal background check be completed on staff annually during their birth month. A criminal background check for contract staff is also completed annually during the birth month.

Document Review - Criminal background checks for eight current staff were requested. Eight were received that were less than five years old.

	<p>f) Human Resource Staff Interview – HR staff said new hire staff and staff applying for promotions are asked questions about (a) 1-3 of this standard on applications for employment. Staff are not required to complete a self-evaluation annually and are not asked these questions again.</p> <p>Document Review – The questions required by this standard are asked on all applications for the Missouri DOC. The applications for fifteen staff hired in the last 12 months were reviewed. All fifteen had questions on the application that asked about prior convictions or civil judgements for sex offenses and prior sexual abuse in an institution.</p> <p>g) Missouri DOC policy D2-2.2 Background Investigations states “False information regarding substantiated allegations of offender or resident abuse and/or harassment on the employment application shall be grounds for termination.”</p> <p>h) Human Resource Staff Interview – HR staff said if another correctional institution contacts the Missouri DOC to inquire about substantiated allegations of sexual abuse or resignations during investigations of a former employee, they will provide information on the substantiated sexual abuse or resignations.</p> <p>CORRECTIVE ACTION REQUIRED: The criminal background checks for ten medical contract staff were not provided for review. The criminal background checks for the ten medical contract staff must be provided for review. If the facility does not have the documents, new criminal background checks must be completed the selected contract staff that are missing.</p> <p>Corrective Action Completed: The facility provided documentation that shows criminal background checks were completed for the ten medical contract staff. This completes the corrective action.</p> <p>The facility meets this standard based on information from interviews, policies and documents reviewed.</p>
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115.18 Upgrades to facilities and technologies	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) The facility reported on the PAQ no substantial expansion or modification since the last PREA audit.</p> <p>Agency Head Interview – The Director said the agency designs expansion and modifications to maximize the agency’s ability to protect inmates.</p> <p>Warden Interview – The Warden said there have been no expansions or modifications to the facility since the last PREA audit.</p>

	<p>b) Warden Interview – The Warden said a housing unit was closed permanently and all of the cameras were redeployed to other areas they identified as needing additional coverage to promote inmate safety since the last PREA audit. Changes to the video monitoring system are made with the goal of improving inmate monitoring based on the requirements of the PREA standards being considered in the design.</p> <p>PCM Interview – The PCM said a housing unit was closed since the last audit and the video cameras were moved to be used in any area of the facility they determined was a blind spot and would benefit from adding a camera. Cameras are used as a deterrent in blind spots and can aid in an investigation. Cameras were added by the sinks in some of the bathrooms due to increased incidents. This auditor checked the view of these cameras on the monitor to see that a black digital box was placed to block the view of the toilets.</p> <p>The facility meets the standard based on the information from interviews and observations.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” The policy also instructs staff to take steps to protect evidence. This may include instructing the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom. If possible, staff should not allow the inmate perpetrator to destroy evidence by preventing showering, changing clothes, eating, drinking, or using the bathroom.</p> <p>Random Staff Interviews – All staff interviewed were asked what their responsibilities are in protecting evidence. All staff said they would ask the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom until evidence can be collected by a SANE at a forensic exam or they are relieved. Staff would ensure the alleged inmate perpetrator would not destroy evidence in the same way. All said they would protect evidence at the scene until it could be collected by investigators.</p> <p>b) MODOC policy D1-8.13 provides a time frame of 72 hours for possible collection of forensic evidence the same as found in the National Protocol for Sexual Assault Medical Forensic Examinations.</p> <p>c) MODOC policy D1-8.13 requires the facility health services staff to contact the on-call SANE staff member if the alleged incident occurred within 72 hours. The policy states “The SANE staff member shall collect evidence according to established forensic procedures for processing and document the exam and finding in the</p>

applicable department computer system.” “If the alleged perpetrator is a staff member, the victim shall be transported to the community emergency room for a sexual assault examination to be performed by a SANE or SAFE.” If the alleged perpetrator is an inmate, the shift supervisor shall contact the on call SANE staff member and hold the victim in medical until the SANE staff arrive. The facility reported 3 forensic exams conducted in the past 12 months.

SANE Staff Interview – A facility nurse from South Central Correctional Facility was interviewed as a regional SANE. She is on-call for central and eastern MODOC facilities along with four other SANE staff. She is certified as a forensic exam nurse. She said the forensic exam can be conducted from 72 hours up to 96 hours depending on the type of sexual abuse that occurred and if the person washed, showered, changed clothes, went to the bathroom, or had anything to eat or drink.

SANE Supervisor – The Centurian Nursing Director/SANE said she covers the eastern region and is on call to conduct forensic exams when needed. She said there are eleven trained SANE nurses for the MODOC with five in the eastern region, two in the central region and four in the western region. If she or other SANE staff are not available, the inmate would be transported to a nearby hospital ER with forensic exam services.

Document Review - Medical records for three inmates that reported sexual abuse documented an immediate evaluation and treatment by medical staff. All three were provided a SANE at the facility by qualified SANE medical staff.

d-e) The MODOC does not have an agreement with a victim advocate organization. The PREA Site Coordinator provided a memorandum that indicates he contacted the Center Against Rape and Domestic Violence about victim advocate services. They were unable to provide the services due to funding. He also contacted another organization but has not received a reply. Due to the lack of local rape crisis centers in the area of ACC, the facility has staff that have attended victim advocate training provided by the Missouri Coalition Against Domestic Violence to qualify them to provide victim advocate services for inmates at ACC. A contract with MOCADV for training and the training curriculum was provided. The training certificates were provided for the Chaplain and Three other staff.

PCM Interview – The DW/PREA Site Coordinator said the Chaplain and three custody staff have completed online training that qualifies them as victim advocates. All can provide victim advocate services for an inmate victim at the investigation interview and at a forensic examination.

Inmate Interview – An inmate that reported sexual abuse said he was offered a victim advocate by the investigator, and he declined. This was also documented in the investigation report.

h) The facility has staff that have attended victim advocate training provided by the Missouri Coalition Against Domestic Violence to qualify them to provide victim advocate services for inmates at ACC. The training certificates were provided for the Chaplain and three other staff.

	The facility meets the provisions of this standard based on the information from interview, policies and documents reviewed.
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>Agency Head Interview - The Director of the Office of Professional Standards was the Agency Head designee for interview and is responsible for the PREA Unit in the office of Professional Standards. He said investigations are completed for all allegations of sexual abuse and sexual harassment in all facilities. The PREA Unit conducts investigations of sexual abuse allegations and the Institutional Investigators conduct investigations of sexual harassment.</p> <p>The facility reported on the PAQ fifteen allegations of sexual abuse during the last 12 months, six resulting in administrative investigations and 15 being referred for criminal investigations. Fifteen investigation files were provided for review. All fifteen were administrative investigations. Three allegations of harassment were referred to the facility Investigator. Twelve allegations of sexual abuse were referred to the PREA Unit Investigators. All fifteen investigations were administrative investigations.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” This policy was found posted on the Prison Rape Elimination Act page of the Missouri DOC website at https://doc.mo.gov/programs/PREA. Policy D1-8.4 Institutional Investigations covers requirements for investigations in general. The policy is identified as confidential, therefore it cannot be posted on the MODOC website.</p> <p>PREA Unit Investigator Interview - The PREA Unit Investigator said she is contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Facility Investigator Interview - The Facility Investigator said he investigates only sexual harassment allegations. If a PREA report is clearly an incident of sexual abuse, a Request for Investigation is completed and sent to the PREA Unit. If the allegation is sexual harassment it is referred to him, the Institutional Investigator. If it is not clear what type of incident is being reported, the Facility Investigator gathers more</p>

	<p>information to determine if it is sexual abuse or sexual harassment. Once it is determined to be sexual abuse, it is referred to the PREA Unit Investigator by completing an RFI and sending it to the PREA Unit in the Office of Professional Standards.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.31	Employee training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall receive initial PREA training during the department's basic training."</p> <p>PREA Basic Training Curriculum – The PREA Basic training curriculum was provided for review. It covers the zero tolerance policy of MODOC; staff responsibilities in prevention, detection, reporting and response procedures; inmate’s rights to be free of sexual abuse, sexual harassment and retaliation; staff rights to be free from retaliation; dynamics of sexual abuse; reactions of victims; how to detect signs of sexual abuse; avoiding inappropriate relationships with inmates; and mandatory reporting laws. The curriculum did not cover professional communication with LGBTI inmates. However, The Professional Boundaries lesson plan was provided for review that provides staff information on how to communicate effectively and professionally with LGBTI inmates. This training is all provided at the Basic Academy in a pre-service training for new hires.</p> <p>Staff Interviews - Staff said they completed the PREA Basic Training at the MODOC Academy. Staff could demonstrate knowledge of zero tolerance policy, rights of inmates and staff, how to detect signs and response of sexual abuse, the dynamics of sexual abuse, avoiding inappropriate relationships with inmates, and their actions in response to a sexual abuse report.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the time of assignment."</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. Years in which an employee is not required to complete training, the facility site coordinator shall provide refresher information on current sexual abuse and sexual</p>

	<p>harassment policies.”</p> <p>PREA Refresher #1-12 – After the PREA Basic is completed at academy, staff are required to complete a PREA Refresher training modules every two years. These modules were reviewed and found they did not cover the required topic in (a) 10 mandatory reporting for victims under 18 and vulnerable adults. Topics (a) 1-9 are covered in the refresher training.</p> <p>Staff Interviews – staff said they complete a PREA Refresher training every 2 years and receive emails monthly between trainings that provide information about responding to reports, detection of sexual abuse, and other information from the PREA Refresher training curriculum as well as policy updates for PREA. Staff demonstrated knowledge of all required topics except mandatory reporting laws.</p> <p>The PREA Refresher training curriculum was updated with information added that covers mandatory reporting to outside agencies for victims under 18 and victims that are vulnerable adults. The revised curriculum will be used for staff completing training going forward. The new material was provided to all staff at the facility via email from the PREA Site Coordinator. A copy of the revised training material and the email sending it to all ACC staff was provided.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All completed PREA training requires a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed the training. This form must be routed through the facility training officer or regional training coordinator.”</p> <p>Document Review – Twenty-three staff records were reviewed for PREA training completion. Fifteen were hired in the last year and eight were veteran staff. All PREA training was completed within the last two years for veteran staff or prior to working with inmates for new staff.</p> <p>CORRECTIVE ACTION REQUIRED: Information must be added to the bi-annual refresher training that covers mandatory reporting laws for victims under 18 or vulnerable adults. The revised curriculum will be provided for review and documentation of communication to staff.</p> <p>Corrective Action Completed: The PREA Refresher training curriculum was updated with information added that covers mandatory reporting to outside agencies for victims under 18 and victims that are vulnerable adults. The revised curriculum will be used for staff completing training going forward. The new material was provided to all staff at the facility via email from the PREA Site Coordinator. A copy of the revised training material and the email sending it to all ACC staff was provided.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard

Auditor Discussion

a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All part-time employees, volunteers, and contract staff members shall receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training."

Training Curriculum – The PREA training curriculum for volunteers and contractors was provided for review. The curriculum provides volunteer and contract staff with the MODOC zero-tolerance policy, rights of inmates, signs of sexual abuse, MODOC's response process, dynamics of sexual abuse, reactions of victims, and how to respond to a report of sexual abuse. The Offender Work Release training curriculum was also provided for review. This training is provided to other Missouri state employees for supervision of ACC inmates on outside work crews. The training provided information about identifying what is an incident of sexual abuse or sexual harassment, and how to detect and respond to sexual abuse or sexual harassment of an inmate.

Work Release Training Documents – The facility provided documentation of work release PREA training completed in 2023 for staff at the Central Region Warehouse, Missouri Governor's Mansion, MODOT, OTAG, and the OA Garage.

Contract Staff Interviews – Three contract staff were interviewed from food service, medical, and mental health. All three said they had received training that covered the policy for zero tolerance of sexual abuse and sexual harassment, and how to detect and respond to incidents of sexual abuse or sexual harassment.

c) Document Review – PREA training completion documents were reviewed for eight volunteers randomly selected from the ACC list of volunteers. All eight had completed the PREA training. PREA Training completion documents were requested for thirteen medical contract staff. Documentation showed completion of the training for six medical staff. The remaining seven medical staff either had no training document provided or a training transcript was provided with the PREA training showing incomplete. The facility must provide documentation for the seven staff completing the training.

CORRECTIVE ACTION REQUIRED: PREA training completion documentation for seven of the thirteen medical staff has not been provided. The facility must provide documentation for the seven staff completing the training.

Corrective Action Completed: The facility provided documentation of PREA training completion for three of the seven medical contract staff. The facility notified this auditor of four medical contract staff that were no longer employed at ACC and did not complete the PREA training during their time at ACC. This auditor requested PREA training completion documentation for all remaining ACC contract medical and mental health contract staff to verify that all medical and mental health contract staff have completed the required PREA training. The facility provided PREA training completion documents for ten additional medical and mental health contract staff.

Based on the information from interviews, policies, documents, the facility meets the provisions of the standard.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” The policy requires the facility to have the PREA offender brochure in several recognized languages. If the brochure is not available in the inmate’s language then an interpretive service will be utilized to provide the information. The PREA offender brochure was provided in seven additional languages. The policy also requires the facility to make PREA reporting information available or visible to all inmates through posters, the offender rulebook, tablets and the brochure. Policy requires the inmates to sign an acknowledgement receipt for viewing the video and receiving the PREA offender brochure.</p> <p>Inmate Interviews – Forty inmates were interviewed. Thirty-seven inmates said they received the PREA education information on the first or second day at the facility. All said they received a PREA brochure. Most said they were shown a video about PREA that provided information also. Staff explained the information and asked if they had any questions. Only three inmates said they did not get the information. All inmates interviewed said they see the PREA reporting information posters in the facility and the hotline number spray painted on the walls. All forty inmates knew several ways to make a report of sexual abuse or sexual harassment.</p> <p>Intake Staff Interview – The Case Manager that provides the PREA education at the Reception and Orientation Unit said he provides the PREA education information the first day or second day the inmates are at the facility. He shows the video at the intake area. He said he meets with the inmates individually to ensure they understand the information if they have disabilities. If an inmate is LEP, the facility can access a telephonic interpretive service. He also can provide the brochure in several other languages. If an inmate has a hearing disability, the video has closed captioning and he can write questions to enable communication. If an inmate cannot read, he reads the information to them. He explains the zero-tolerance policy, inmate rights, anonymous reports to the Crime Victim Unit, calling the PREA hotline, telling any staff, writing any staff, and victim advocacy services available at the facility.</p> <p>Tour Observations – A PREA education could not be observed during the onsite audit. While touring the intake area, the PREA education process was explained by the PREA Site Coordinator/DW. PREA posters were observed throughout the facility in inmate housing units, program areas, recreation areas, dining hall, medical waiting area and inmate work areas. The posters provided information on how to report sexual abuse and sexual harassment and were printed in English and Spanish. They</p>

	<p>were placed at a height and in a print size that inmates could easily read. The PREA brochure was provided in both English and Spanish. The brochure provides inmates with information on what is an incident of sexual abuse or sexual harassment, the zero-tolerance policy for MODOC, prevention of sexual abuse, reporting sexual abuse and sexual harassment, and victim rights. The PREA hotline phone number was spray painted on the wall next to the inmate phones in large size letters that were easy to see.</p> <p>Document Review – Documentation for PREA education was requested and reviewed for forty inmates. The facility provided the Offender Sexual Abuse and Sexual Harassment Acknowledgement forms for the forty inmates after the onsite audit at the time of the interim report. The PREA education was completed the same day or the day after intake.</p> <p>The facility meets the standard based on the information from interviews, documents and policies reviewed.</p>
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115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators assigned to investigate offender sexual abuse allegations shall receive specialized PREA investigator training.” The policy reflects the provision’s requirement.</p> <p>Training Curriculum – The NIC PREA: Investigating Sexual Abuse in a Confinement Setting was reviewed by this auditor. The training covers the investigation standards, Miranda, Garrity, evidence collection, forensic examinations, interviewing techniques,, understanding the victim, and evidence requirements for substantiating administrative cases or for making a prosecutorial referral. The curriculum covered the requirements of the standard.</p> <p>PREA Unit Investigator Interview – A PREA Unit Investigator and Algoa CC Investigator were interviewed. The PREA Unit Investigator said she completed the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting and the advanced NIC investigations course. She also has completed sexual abuse investigation training through VAWA as well.</p> <p>Document Review - The NIC PREA Investigations training certificates were provided for the twelve PREA Unit Investigators.</p> <p>The facility meets the standard based on the information from interviews, documents and policies reviewed.</p>

115.35	Specialized training: Medical and mental health care
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1437 454">a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Health services staff members shall receive specialized PREA medical and mental health training."</p> <p data-bbox="256 499 1465 857">Training Curriculum - The Centurian PREA Overview training curriculum was provided for review. The curriculum is a medical contractor's specialized medical training that all medical and mental health staff complete. The curriculum comes from Relias training. The training curriculum provides information about what is sexual abuse and sexual harassment; how to detect and assess sexual abuse and sexual harassment; preserve physical evidence; how to respond and communicate with victims; how medical and mental health staff are to report any knowledge or suspicion of sexual abuse and sexual harassment. The training curriculum covers the requirements of this provision of the standard.</p> <p data-bbox="256 902 1469 1182">b) Medical Staff Interview - The Health Services Director said she has completed specialized medical training through Centurian. She said all medical staff complete annual PREA training. The specialized medical training covers how to detect and assess signs of sexual abuse and sexual harassment, what medical staff can do to preserve physical evidence, how to respond to victims, and who to report allegations or suspicions to. She said she has also completed the PREA training for contract staff as well.</p> <p data-bbox="256 1227 1469 1417">Mental Health Staff Interview - The mental health staff said she receives specialized medical training through Centurian annually and has completed the PREA training for contract staff. The training has a trauma informed approach. The training covered the protection of evidence, signs of sexual abuse, communication with victims, and reporting sexual abuse and sexual harassment.</p> <p data-bbox="256 1462 1449 1619">c) The facility was asked to provide documentation of the specialized medical training for ten randomly selected medical and mental health staff. The documents have not been provided. Though the staff said they received the training in interviews, the facility must provide training completion documentation.</p> <p data-bbox="256 1664 1469 1821">d) The facility provided documentation of PREA training completion for six out of twelve randomly selected medical and mental health staff. The facility must provide documentation of the completion of training for the six remaining staff or have the staff complete the training as required by the standard.</p> <p data-bbox="256 1865 1465 2022">CORRECTIVE ACTION REQUIRED: Provide documentation of completion for the specialized medical training for all selected medical and mental health contract staff. Provide documentation of PREA training completion for the six medical and mental health contract staff.</p> <p data-bbox="256 2067 1449 2101">Corrective Action Completed: The facility provided documentation of Specialized</p>

	<p>Medical training completion for two of the six medical and mental health contract staff. The facility notified this auditor of four medical contract staff that were no longer employed at ACC and did not complete the PREA training during their time at ACC. This auditor requested Specialized Medical training completion documentation for all remaining ACC contract medical and mental health contract staff to verify that all medical and mental health contract staff have completed the required Specialized Medical training. The facility provided Specialized Medical training completion documents for ten additional medical and mental health contract staff. PREA training completion documents were also provided for the additional staff for 115.32.</p> <p>Based on the information from interviews, policies, documents, the facility meets the provisions of the standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All offenders shall be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding offender housing assignments, transgender and intersex offenders and the probation and parole procedures regarding housing assignments, transgender and intersex clients, and contracted residential facilities." The policy requires an assessment of risk of victimization and abusiveness.</p> <p>b) Missouri DOC policy IS5-2.3 Offender Internal Classification states "CCMs will conduct a new internal classification within the first 72 hours at that facility and the offender will be housed in accordance with the new internal classification score." The policy requires a new risk assessment to be completed within 72 hours of arrival at the facility.</p> <p>Risk Screening Staff Interview - The staff that conducts risk screening said all inmates who arrive at Algoa CC are screened within the first two days of arrival for risk of victimization and risk of abusiveness.</p> <p>Inmate Interviews - Thirty-five out of forty inmates said they could recall meeting with a Case Manager privately and being asked questions about prior victimization, sexual orientation, gender identity, disabilities, and their views of vulnerability to sexual abuse on the first or second day in the intake area.</p> <p>Document Review - Thirty-eight out of forty initial assessments reviewed were completed within 72 hours. One was deemed out of time frame due to no time of arrival or completion time provided, and the date of completion occurring three days after arrival. It was recommended to the PREA Coordinator that the time of arrival</p>

and time of assessment completion be tracked to document compliance when an assessment is completed the third day after arrival. Thirty-eight out of forty is substantial compliance with the standard time frames.

c) Missouri DOC policy IS5-2.3 Offender Internal Classification states "Facilities shall assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities." The risk assessment was provided for review. The factors in the assessment were found to be objective.

d) Risk Screening Staff Interview - The staff that complete the risk screening said he provides the assessment questions to the inmate on a form and then he meets with inmates in private in the intake area to go over the questions to gather information to complete the risk screening. The questions are about prior sexual abuse victimization; prior sexual abuse perpetration; feelings of vulnerability to sexual abuse; cognitive and physical disabilities; identifies as or is perceived to be LGBTI or gender nonconforming. He also reviews the inmate record for additional information on criminal history, conduct history for violence or sexual abuse, age, size description, sex offenses, and violent offenses.

Document Review - The Internal Classification Risk Assessment was reviewed and found to assess risk of victimization for the following factors: disabilities, age, inmate build, prior incarceration, prior conviction for sex offense with a Child victim, LGBTI or Gender non-conforming, prior victim of sexual abuse, and perception of vulnerability. Inmates are not detained solely for civil immigration in the MODOC. The internal classification risk assessment does not assess for prior convictions for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet this provision of the standard.

e) Document Review - The Internal Classification Risk Assessment was reviewed and found to assess the risk of abusiveness for the following factors: prior sexual abuse - prior conviction for sex offense with Adult victims; prior convictions for violent offenses - prior convictions for violent crimes; history of prior institutional violence or sexual abuse - conduct for violent offenses past 10 years and conduct violation for murder or forcible sexual conduct older than 5 yrs but less than 10 yrs. Though there is an assessment for prior sexual abuse involving adults, not assessing for sex offense convictions with child victims does not assess for any or all prior sexual abuse. The time restriction on forcible sexual conduct prevents assessing for that conduct that is outside of the timeframe. This doesn't assess for all prior sexual abuse while incarcerated. This does not meet this provision of the standard.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be reassessed within 30 days of arrival. The reassessment shall consider additional relevant information received by the facility after the initial intake screening."

Risk Screening Staff interview – The staff said he meets with inmates two weeks after intake to complete the reassessment of the risk screening. He asks the same questions for the reassessment as he did for the intake assessment. He completes a whole new assessment based on the inmate’s answers and the information from the inmate’s record.

Inmate Interviews – Most inmates said they were asked the same questions from the intake meeting a second time about a month later. Some did not recall being asked the questions a second time but said they could have been asked and they just do not remember.

Document Review – Re-assessments were reviewed for forty inmates. Thirty-six out of the forty were completed within 30 days of the inmate’s arrival at the facility. Two were not provided for review. One was completed out of the time frame. Thirty-six were completed between twenty-five to twenty-nine days and demonstrated substantial compliance.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The offender's risk level shall be reassessed when warranted due to a referral, incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness.”

Risk Screening Staff Interview – Staff said if new information is received that changes the answers to the last screening, a new assessment is completed. If there is a substantiated incident of sexual abuse, a Case Manager will do a new assessment as well.

h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The offender shall not be disciplined for refusing to answer or not disclosing complete information during the assessment.”

Risk Screening Staff Interview – Staff said inmates do not have to answer the questions for the risk screening and refusing to answer will not result in discipline.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The chief administrative officer (CAO) or PREA site coordinator shall control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders.”

PREA Coordinator Interview – The PREA Coordinator said information obtained for the risk assessment is confidential and access to the electronic system the assessments are completed in is controlled and limited to the staff that need to complete assessments and the staff involved in reviewing them.

CORRECTIVE ACTION REQUIRED: The internal classification risk assessment does not assess for prior convictions for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet provision (d). There is an assessment for prior sexual abuse involving adults, however not assessing for sex offenses with child victims does not assess for any or

all prior sexual abuse. This does not meet provision (e). The time restriction on forcible sexual conduct prevents assessing for that conduct that is outside of the time frame. This doesn't assess for all prior sexual abuse while incarcerated. The internal classification risk assessment must be modified to meet provisions (d) and (e). Once the modification is approved, completed assessments must be provided for review of use within the required time frames in the standard.

Corrective Action Completed: The MODOC PREA Coordinator and Director of Office of Professional Standards said the risk assessment is completed in an electronic computer system that will take more time to modify than is allowed in the corrective action period. As a result, an agreed upon corrective action was developed. The process to complete the assessment was modified by using comment sections in the current assessment to document changes in what is being assessed on specific factors until the MODOC can make permanent changes to the assessment in the electronic system. There were changes to five factors being assessed on the current assessment that had been identified as not meeting the standard.

- Adult victim was added to victimization question 14 for prior sex offense convictions. A comment will be added for scoring Adult victim in addition to the current Child victim.
- Exclusively non-violent criminal history factor in the victimization section will be scored as an override when the answer is No to question 17 in the risk of abusiveness section that scores convictions for crimes of violence. If the answer is No and the victimization section score is 2 points, the staff will complete an override to a Sigma (risk of victimization) in number 20 for the inmate having a non-violent criminal history. Non-violent criminal history will be placed in the comment section.
- Child victim was added to risk of abusiveness question 16 in addition to Adult victim. The comment Child Victim is added if the answer is Yes and the victim is a child.
- Staff were instructed not to follow the time limitations on questions 18 and 19. A Yes response will be given for any institutional conduct history for violence or sexual abuse with comments added to document the information being outside of the time frames.

The changes were added to the training manual for the risk assessment and training was provided to the staff that complete risk assessments at ACC on August 15, 2024 by the PREA Unit Manager. The new assessment process was put in place at ACCC following the training. A sample of intake assessments and 30-day reassessments completed during August and September, 2024 were provided for review each week. A total sample of twenty intake assessments and twenty-five reassessments were reviewed for use of the new process. All were completed in the correct time frames and using the new process for scoring. The MODOC PREA Coordinator and Director of Office of Professional Standards said the agency will continue to work toward changes in the electronic risk assessment to make these changes permanent.

Based on information from interviews, policies, document and corrective actions reviewed, the facility meets the provisions of the standard.

115.42	Use of screening information
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 338 1469 707">a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This shall be in accordance with the institutional services procedures regarding offender housing assignments, transgender and intersex offenders, offender recreation and activities, and probation and parole procedures regarding community supervision centers, the community release center, and contracted residential facilities.”</p> <p data-bbox="256 745 1445 1115">Missouri DOC policy IS5-2.3 Offender Internal Classification states “The department utilizes an internal classification system to assist department staff members in determining appropriate housing, programs, and work assignments of offenders to ensure offender safety, institutional security, and compliance with the Prison Rape Elimination Act (PREA) guidelines.” This policy provides the procedures for completing the PREA risk assessment. The risk assessment is used to guide the placement of inmates in housing assignments and programs. Inmates who are high risk of victimization (Sigma) are not housed in the same room as inmates who are high risk of abusiveness (Alpha).</p> <p data-bbox="256 1153 1477 1355">The facility has a housing assignment report with the internal classification identified on the report. This allows staff to monitor placement based on Sigma, Alpha or Kappa (no risk). A copy of the report for ACC was provided. It showed most inmates are not a risk for victimization or abusiveness. Inmates who are at risk for victimization were housed in two units with Kappas.</p> <p data-bbox="256 1393 1469 1594">Missouri DOC policy IS18-1.1 Required Activities requires housing unit staff to utilize internal classification information to designate required assignments for the purpose of keeping separate and/or ensuring appropriate monitoring of inmates at high risk of being sexually victimized from inmates who are at high risk of being sexually abusive when working or attending programming together.</p> <p data-bbox="256 1632 1230 1666">The policies meet the requirements of this provision of the standard.</p> <p data-bbox="256 1704 1469 1861">PREA Compliance Manager Interview – The PREA Site Coordinator said the Sigmas are housed on their own wings and Alphas are housed on other wings. They are never in the same rooms. The Functional Unit Manager runs a report with the flags from the offender information system to monitor for correct placement weekly.</p> <p data-bbox="256 1899 1461 2056">b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at</p>

high risk of being sexually abusive.”

c) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee is responsible for determining a permanent housing assignment for each transgender or intersex offender, and prior to this assignment shall meet with each offender to determine his vulnerability within the general population and length of time living as the acquired gender. Transgender and intersex housing assignments shall not be made based solely on genitalia but must consider the offender’s health and safety and the security of the facility through a review of the respective classification, medical and mental health records.”

Missouri DOC policy IS5-3.3 Transgender and Intersex Offenders provides the process for review of an offender that has identified as transgender or intersex at the risk assessment. The staff that conduct the risk assessment notify the PREA Site Coordinator of the transgender or intersex identification. The Transgender Committee consists of the PREA Site Coordinator, medical administrator, mental health chief, and medical director. The Transgender Committee has an initial meeting with the offender. The offender then meets with Mental Health to be reviewed for gender affirming items, hormone therapy treatment consideration, and discuss health and safety concerns. The Transgender Committee completes the Transgender Committee Review form and forwards it to the Transgender Review Team in central administration. The Transgender Review Team consists of the PREA Coordinator, deputy division director, director of rehabilitative services.

PREA Compliance Manager Interview - The PREA Site Coordinator said the facility has a facility transgender committee that meets with an inmate who identifies as transgender at the risk assessment or at any time while housed at ACC. The committee consists of the medical and mental health directors, classification staff and unit management staff. The committee reviews the transgender inmate’s views of safety in the facility housing placement and program/work assignments. The committee also reviews gender affirming items, showering separately and the potential for hormone therapy. He said the Transgender Committee Review form is completed and sent to the Transgender Review Team in central administration for review and final decision.

Documentation of Transgender Committee Reviews was requested for three inmates who either identified as transgender during the interview or identified at the risk assessment as transgender. Two were not received and the PCM said one was not completed as the Committee was not notified the inmate had identified at the assessment interview. This does not meet the standard.

d) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee shall meet with the offender within 10 working days of either the offender’s arrival to the facility or upon learning the offender’s transgender or intersex status and every 6 months thereafter.”

PREA Compliance Manager – The PREA Site Coordinator (DW) said the Transgender Committee would meet with an inmate who identifies as transgender every six months to conduct a review of the inmate’s feelings of safety, facility housing

assignment, work assignment or program assignment and any concerns about showers.

e) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee review shall include the following: (1) Offender's view of his vulnerability."

Risk Screening Staff Interview – The staff that conducts risk screening said the Transgender Committee completes all reviews with inmates who identify as transgender. He informs the PREA Site Coordinator when an inmate identifies as transgender.

PREA Compliance Manager Interview – The PREA Site Coordinator said the Transgender Committee meets with the inmate to ask for their views of safety.

Transgender Inmate interview – Two transgender inmates were interviewed. One inmate said the Transgender Committee asked for their views of safety regarding their facility housing assignments. The other inmate said they did not meet with the committee. Both inmates said they felt safe in their placement at ACC. The Transgender Committee must conduct a review of the inmate who's interview was not completed where showers can be reviewed.

f) PREA Compliance Manager – The PREA Site Coordinator (DW) said the Transgender Review Committee asks transgender inmates if they want to shower while other inmates in the housing unit are in their cells.

Transgender Inmate Interview – One transgender inmate said separate showers was offered and chose not to shower separate. Another was showering at a separate time.

g) Transgender Inmate Interview – Two transgender inmates said they are not housed in a unit that is dedicated to transgender, gay or bisexual inmates.

Documentation of Transgender Committee Reviews was requested for three inmates who either identified as transgender at the risk assessment. The PREA Site Coordinator said one was not completed as the Committee was not notified the inmate had identified as transgender at the assessment interview. This does not meet the standard.

Corrective Action Required: The Transgender Committee must conduct a review of the inmate that was not completed to discuss the inmate's views of safety and showering separate from other inmates. Documentation for all three Transgender Committee Reviews must be provided for review to determine if the facility meets this standard.

Corrective Action Completed: The facility provided the Transgender Committee Review documents for two of the three transgender inmates. One transgender inmate was released before the meeting could be completed. As a result, this auditor requested Transgender Committee Review documents for any transgender inmates that arrive during the corrective action period. Seven inmates identified as

	<p>transgender at the risk screening at intake after the onsite audit to October. The PREA Coordinator provided the Transgender Committee Review documents for all seven. The facility has demonstrated current compliance with the standard based on the reviews.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility has demonstrated substantial compliance with the provisions of this standard.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.”</p> <p>MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30 day review.</p> <p>Staff Who Supervise Segregation - A Unit Manager that supervises the segregation unit was interviewed. He said if an inmate is placed in segregation involuntarily the reason would be documented in the inmate confinement report (TASC) along with the restrictions. A review of placement in administrative segregation is completed during the first week and then again at 30 days. The review will document that there are no alternative housing options and the restrictions while in segregation. He said the goal is to get the inmate back into population within 5 days or place them on protective custody status. If an inmate cannot be placed safely in open population, they can review the possibility of transfer to another facility. He said some program course work can be completed while in segregation. Most privileges would be restricted.</p> <p>Warden Interview – The Warden said if an inmate is determined to be at high risk for sexual abuse from the assessment at intake, the intake staff would try to find the safest housing assignment in general population. Involuntary segregation would only be used as a last choice. A transfer to another facility would be considered if the inmate cannot be in general population.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>

115.51	Inmate reporting
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Auditor Overall Determination: Meets Standard

Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request (IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline, and d. advocacy agency." The methods of reporting are communicated to inmates in the PREA offender brochure provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC, report to any staff, or calling the PREA hotline.

Random Staff Interviews - Staff said inmates can report sexual abuse, sexual harassment or retaliation by calling the PREA hotline, telling any staff, writing any staff, filing a grievance, or having family make the report. Most knew inmates could write to the Crime Victims Unit and be anonymous.

Inmate Interviews - All inmates said they can report retaliation, sexual abuse or sexual harassment by telling any staff, writing staff by dropping a "kite" in the mailbox on the housing unit or calling the PREA hotline. Most thought they could make an anonymous report by not putting their name on the written report and dropping it in the mailbox. Some were aware of the anonymous report to an external organization they saw on a poster. Some inmates said they could file a grievance. All inmates were aware of multiple ways to make a report of retaliation, sexual abuse or sexual harassment.

Tour Observations - PREA posters with information telling inmates how to make a report of sexual abuse and sexual harassment were observed in every housing unit dayroom next to the inmate phones, recreation areas, the dining hall, education classrooms, and clothing issue at intake. The information was also posted in areas where inmates wait for commissary orders or medical appointments. The PREA hotline phone number was spray painted on the walls next to the offender phones.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail and not subject to examination." The policy requires an external reporting method that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure.

PCM Interview - The PREA Site Coordinator/DW (PCM) said inmates can report to the Department of Public Safety by writing to the address on the posters and in the PREA brochure. This correspondence is treated as privileged and cannot be read or censored. Inmates can leave their name off the envelope and correspondence if they want to remain anonymous.

	<p>Document Review – the facility provided a copy of the MOU between the Missouri DOC and the Missouri Department of Public Safety that was signed in 2013 and is ongoing until it is deemed unnecessary by either party. The MOU provides the responsibilities for each organization in receiving and processing written correspondence from MODOC inmates and residents regarding allegations of sexual abuse and sexual harassment. The MOU requires the correspondence to be immediately forwarded to the DOC, allowing the inmate to remain anonymous.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure.”</p> <p>Random Staff Interviews - Staff said they are required to take any verbal, written, anonymous or third-party report. When they receive a verbal report, they are required to document the report and the steps they followed providing the information as required in a written incident report. This report must be turned in immediately or prior to leaving the shift.</p> <p>Inmate Interviews – Inmates said they can make a report privately by calling the PREA hotline or telling their Case Manager.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct.” The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.</p> <p>Random Staff Interview – Staff said they could privately report information about sexual abuse or sexual harassment by calling the ethics line or the PREA hotline. They could also complete an IOC and email it to a supervisor or talk to their supervisor in private. Posters for the ethics line (CLEAR Line) were observed in staff break areas and PREA Hotline posters are throughout the facility.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

b) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not impose a time limit on when an offender may submit a complaint regarding an allegation of offender sexual abuse.” “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.” “Nothing in this section shall restrict the agency’s ability to defend against an offender lawsuit on the ground that the applicable statute of limitations has expired.” The policy allows for any complaints regarding sexual abuse to bypass the informal process and proceed immediately to grievance stage.

The facility provided a report generated from the Grievance Management System that indicates there were no grievances regarding sexual abuse or sexual harassment in 2023. There were no sexual abuse allegations reported via grievance noted from the review of investigations during the review period. One investigation that was reviewed documented an inmate filing an Informal Resolution Request that reported sexual harassment by a female CO. The Warden assigned the report for investigation the next day. An IRR is not a formal grievance, but is part of the grievance process.

c) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.”

d) Missouri DOC policy D5-3.2 Offender Grievance states “Offender grievances alleging sexual abuse shall be processed as follows: If determined to be a non-emergency the CAO or designee shall respond within 30 calendar days of receipt. Non-emergency offender grievance appeals alleging offender sexual abuse shall be processed as follows: a response shall be provided as soon as practical, but no later than 60 calendar days of receipt. Computation of the 60 day time period shall not include the days between the offender’s receipt of the offender grievance response and receipt of the offender grievance appeal by the offender grievance unit at central office. Appeals shall be referred to the deputy division director or designee. An extension of time to respond, of up to 70 calendar days, may be claimed if the normal time period for response is insufficient to make an appropriate decision. The offender shall be notified in writing of such extension and shall be provided a date by which a response shall be provided. During the administrative process, including the offender grievance appeal level, if the offender does not receive a response within the time allotted for a reply, including extension, the offender may proceed to the next level of the offender grievance process.”

There were no sexual abuse or sexual harassment investigations where the inmate reported through a grievance.

e) Missouri DOC policy D5-3.2 Offender Grievance states “Third Party Reporting: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, shall be permitted to assist offenders in filing requests for grievances or appeals relating to allegations of offender sexual abuse. This assistance cannot interfere with the safety and security of the institution. When a staff member receives the documentation from the reporting third party, it shall be attached to the

	<p>grievance form and shall immediately be recorded in accordance with this procedure. A copy of the documentation shall also be forwarded to the CAO or designee in order to be attached to the possible investigation or inquiry. The CCM shall attempt to discuss the issue with the offender (victim) prior to developing a response to confirm if the alleged victim agrees to have the request filed on his behalf. If the offender declines to have the request processed on his behalf, the CCM shall document the offender's decision and the complaint shall be considered withdrawn for grievance purposes."</p> <p>f) Missouri DOC policy D5-3.2 Offender Grievance states "If the CAO or the PREA site coordinator determines that the complaint meets the definition of a PREA emergency grievance, the grievance shall be addressed as follows: The CAO or designee shall prepare an initial response which shall be attached to the grievance and provided to the offender within 48 hours of receipt of the initial filing date. The offender shall sign and date the response. A final response from the CAO or designee shall be provided to the offender within 5 calendar days from the initial filing date. The offender shall sign and date the form. The initial and final response for the grievance shall document the department's determination whether the offender is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance."</p> <p>The facility reported on the PAQ and through a memorandum from the PREA Site Coordinator that no emergency grievances were received in the last 12 months.</p> <p>g) The facility reported no disciplinary action against an inmate for filing a grievance alleging sexual abuse in the past 12 months.</p> <p>The facility meets this standard based on the information from interviews, documents and policies reviewed.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall offer alleged victims of offender sexual abuse, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, during the investigative process. When an allegation of sexual harassment is forwarded for investigation, the alleged victim of sexual harassment will be offered a victim advocate. Offenders shall be allowed to communicate with an advocate by mail or special visit in a confidential manner as possible to maintain safety and security of the institution."</p> <p>Inmate Interviews - Inmates were aware there were services available for victims of sexual abuse through the victim advocate staff at the facility. Most inmates knew</p>

there might be a victim advocate organization outside of the facility that they could write to that they see on posters.

Tour Observations – During the tour, Victim Advocate posters were observed in housing unit dayrooms and other areas inmates frequent. The posters contain the addresses for Just Detention International and Rape, Abuse and Incest National Network.

Victim Advocate Interview - A victim advocate qualified staff said he completed an online training. He is notified by the shift supervisor if there is an incident of sexual abuse reported and will report to the facility during off hours. He said the training covered victim care and covered the process of the forensic examination.

Conversations with the victim are confidential unless there is information provided that is a safety or security concern. He said he can provide victim advocate services for a forensic exam at the facility or at the hospital. He also provides victim advocate services for the victim during investigator interviews if requested.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before being given access to a victim advocate, the offenders shall be informed of the extent to which communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory reporting laws.”

Document Review – Victim Advocate posters have a statement at the bottom informing inmates that letters to the victim advocate organizations are subject to examination by staff.

Victim Advocate – This auditor contacted Just Detention International to ask if correspondence has been received from an inmate at the Algoa Correctional Center during the review period. A response was received stating there had been no correspondence received from an inmate at Algoa CC.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If a facility is unable to enter into a MOU with the advocacy center, the attempt shall be documented and advocacy services shall be provided by a qualified staff member.”

PREA Coordinator Interview – The PREA Coordinator said he is communicating with the Missouri Coalition Against Domestic Violence to attempt to obtain an MOU for victim services for all Missouri DOC facilities through correspondence or a hotline.

The PREA Site Coordinator (PCM) provided a memorandum stating he made contact with a local rape crisis center regarding the provision of victim advocacy services for ACC inmates. The organization said they could not provide services due to funding restrictions.

The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Facility Tour - Posters were observed during the tour in the visiting room that provide visitors with information for reporting sexual abuse and sexual harassment to the PREA Unit of the Missouri DOC. The mailing address, email address and telephone number are on the poster. The poster informs family and friends that the MODOC has zero tolerance for sexual abuse and sexual harassment. The poster says "Friends, family or anyone outside of the facility may report sexual abuse or sexual harassment for an offender." These posters were also observed in the dayrooms of all housing units.</p> <p>MODOC PREA Webpage - The Missouri DOC PREA webpage provides information under the Friends and Family section for reporting sexual abuse and sexual harassment by calling, writing or emailing. This was observed at https://doc.mo.gov/programs/PREA.</p> <p>Inmate Interviews - Inmates said their family could report an incident of sexual abuse or sexual harassment for them by calling the number in their PREA brochure. Some said they see posters that say their family can report and how.</p> <p>A test report was sent on the PREA email prior to the onsite audit. A message was received back in two days acknowledging the message was received the same day it was sent. A test report was made to the PREA hotline after the onsite audit. The Missouri DOC PREA Coordinator emailed back acknowledging receiving the call within 24 hours.</p> <p>The facility meets the standard based on information from observations and interviews.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Failure to report offender sexual abuse is a Class A misdemeanor in accordance with Missouri state statute. All staff members, shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure." The facility provided a copy of the law in the PAQ.</p>

Staff Interviews – Staff said they are required by state law to immediately report any knowledge or suspicion of sexual abuse or sexual harassment of an inmate or retaliation against an inmate or staff must be reported by state law. They also said they would have to report if they were aware of staff failing to report.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions.”

Staff Interviews – All staff said any information from a report of sexual abuse or sexual harassment could not be shared with co-workers or staff that are not involved in the response to or investigation of the incident.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health staff members shall inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes.”

Medical Staff Interview – Medical staff said inmates are notified of their duty to report any information the inmate reveals about an incident of sexual abuse that occurred in a correctional institution. They have the inmate sign a form at intake that tells them about the duty to report and limits of confidentiality.

Mental Health Staff Interviews - Mental Health staff said they notify inmates of their duty to report information about sexual abuse in an institution each time they provide services.

Document Review – A review of investigations found one investigation of sexual abuse was reported to mental health staff and one was reported to medical staff. The staff immediately provided the information to security staff as required.

d) A search of the internet found reports of sexual abuse of a vulnerable adult must go to Adult Protective Services at the Department of Health and Senior Services.

PCM Interview – The DW PREA Site Coordinator said sexual abuse incidents involving an inmate under 18 must be reported to Social Services and sexual abuse of a vulnerable adult must be reported to Senior Services.

Investigation File Review – Three investigations of sexual abuse were initiated by a third-party report.

e) Warden Interview – The Warden said all reports of alleged sexual abuse are referred for investigation to the PREA Unit. All allegations of sexual harassment are referred for investigation to Algoa CC Institutional Investigator.

The facility meets the standard based on information from interviews, policies and documents reviewed.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, shall immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist.” The facility reported zero incidents of imminent risk of sexual abuse in the past 12 months.</p> <p>Agency Head Interview – The Division Director said the facility would immediately remove an offender from a situation that is a substantial risk of imminent sexual abuse. The facility could move the offender to another work, program, housing assignment or place the offender in protective custody and transfer to another facility.</p> <p>Warden Interview – The Warden said if they learn an inmate is in imminent risk of sexual abuse, staff are instructed to stay with the inmate, the shift supervisor will immediately identify the alleged perpetrator and remove them from the alleged victim that made the report. If the perpetrator cannot be identified, the inmate that reported may have to be moved. They try to keep the inmate victim in the least restrictive housing if they can.</p> <p>Staff Interview – All staff said if an inmate reported an incident of sexual abuse or being in imminent risk of sexual abuse, they would immediately take the inmate to a safe place and stay with him while they report to their supervisor and the shift supervisor.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving an allegation that an offender was sexually abused while confined at a facility outside of the department, the CAO or designee or the appropriate office shall ensure the outside facility is notified of the allegation within 72 hours. The CAO or designee shall maintain documentation of the allegation received and when the outside facility was notified with the allegation.”</p> <p>Warden Interview – The Warden said if an inmate reports an allegation of sexual</p>

	<p>abuse that occurred at another facility, he would have the DW/PREA Site Coordinator send the information to the other facility head for their investigation within 72 hours. The inmate would be offered medical and mental health services, victim advocacy services and be monitored for retaliation. The facility would assist investigators at the other facility/agency by arranging an interview with the alleged victim. He said they have no had to notify another facility of a sexual abuse report in the last year.</p> <p>The facility reported on the PAQ that no allegations were reported by an inmate who indicated that they were a victim of sexual abuse at another facility during the review period.</p> <p>d) Warden Interview – The Warden said if he receives a report about an incident of sexual abuse that occurred at ACC from another facility head that was reported by a former ACC inmate, he would follow normal procedures and assign it for investigation.</p> <p>Two investigations reviewed were in response to reports of sexual abuse that were received from other MODOC facilities. Both reports were immediately referred to the PREA Unit for investigation through an RFI.</p> <p>The facility meets the standard based on information from interviews, polices and documents reviewed.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “In the event of an allegation of a penetration act, the first responder shall take the following steps: (1) Ensure the safety of the victim. (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable. (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (4) The shift supervisor shall make telephone notifications and respond as outlined in the facility’s coordinated response to offender sexual abuse protocol.”</p> <p>Random Staff Interviews - Security Staff said if an inmate reports being sexually assaulted they would instruct the victim to not change clothes, shower, brush teeth, eat drink, smoke or use the restroom in order to protect evidence from being destroyed. Non-security staff said they would instruct the victim not to change clothes, shower, brush teeth, eat drink, or use the restroom to protect evidence from being destroyed. They would then notify security staff, specifically the shift commander’s office and wait for security staff to come take custody of the inmate.</p>

	<p>All staff said they would separate the victim from other inmates and keep him safe. If the scene was determined, they would notify the Shift Commander so other staff could be sent to protect it.</p> <p>There were twelve investigations of sexual abuse during the review period. Five of the allegations were made to security staff that separated the inmate victim from the perpetrator. Three allegations of sexual abuse were made in a time frame that allowed for the collection of physical evidence. Security staff first responders protected evidence on the victim in two incidents and a non-security staff first responder protected physical evidence until security staff arrived. The non-security staff notified security staff immediately. Security staff were able to secure the scene in all three cases. Non-security staff were the first responders to four allegations of sexual abuse. In all four incidents, non-security staff notified security staff of the allegation. Two allegations of sexual abuse were reported when the inmate victim was at another facility.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review – The facility uploaded a revised coordinated response plan that had not been completed. This auditor asked for the current plan that was in use until the revision could be completed. The 2021 Alcoa Correctional Center Coordinated Response to Offender Sexual Abuse was provided for review. The document is ACC’s institutional plan to coordinate staff actions in response to an incident of sexual abuse. The plan provides basic roles to staff first responders, medical and mental health staff, the Shift Commander, PREA Site Coordinator, victim advocate staff, and the Chief Administrative Officer or designee. The plan also covers staff response to allegations of penetration and non-penetration incidents of sexual abuse.</p> <p>Warden Interview – The Warden said the facility has a coordinated response plan for allegations of sexual assault and sexual abuse. The plan is specific to Alcoa Correctional Facility and informs staff of their responsibilities in response to allegations of sexual abuse.</p> <p>The facility meets this standard based on information from the interview and plan reviewed.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) MDOC policy D2-11.6 Labor Organization states “Per the Prison Rape Elimination Act, the department shall not enter into or renew any collective bargaining agreements or other agreements that limit the department’s ability to remove alleged staff sexual abusers from contact with any offender or resident pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.”</p> <p>Agency Head Interview – The designee for the MODOC Director said the Missouri DOC does have an active bargaining unit agreement, but it does not limit the agency’s ability to remove staff alleged to have committed sexual abuse away from inmates during the investigation the same as other staff.</p> <p>PREA Coordinator Interview – The PREA Coordinator said the Missouri DOC has a collective bargaining agreement for staff, but it does not prevent the removal of staff from contact with an offender that alleged sexual abuse by the staff. He said the agreement may have expired and has not been renewed.</p> <p>The PREA Site Coordinator provided a memorandum that states the MODOC does not currently have a collective bargaining agreement.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA site coordinator shall ensure victims, individuals who report sexual abuse, and those that cooperate with offender sexual abuse investigations are monitored and protected from retaliation.”</p> <p>Documentation of retaliation monitoring that was conducted by ACC staff for ten allegations of sexual abuse. Two allegations of sexual abuse were made by inmates at other MODOC facilities for incidents that occurred at ACC. ACC staff did not monitor for retaliation in those cases.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires the PREA Site Coordinator to offer emotional support services to offender victims, witnesses, reporters, staff reporters and staff witnesses.</p> <p>Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.</p>

Warden Interview – The Warden said he has staff designated to monitor for retaliation. If retaliation is suspected, the person retaliating will be separated from the inmate victim. An inmate who is determined to be retaliating may be moved away from the inmate victim or transferred to another facility. Staff suspected of retaliation can be reassigned away from the inmate or put on temporary suspension. If it is determined staff are retaliating progressive discipline will be used up to termination.

Retaliation Monitoring Staff – The staff who conduct retaliation monitoring said she is assigned monitoring when the monitoring form is emailed to her. She said she had an initial meeting with the inmate victim. She informs the inmates she will meet with them every 30 days and they can contact her between meetings if they have concerns about retaliation.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The alleged victim of offender sexual abuse shall be monitored for a minimum of 90 days to assess any potential risk or act of retaliation. The assessment-retaliation status checklist form shall be used during each of the assessment interviews. If the victim expresses fear of retaliation, monitoring shall continue for an additional 90-day period or until the victim or reporter is no longer in fear of retaliation or if the investigation is unfounded.”

Documentation Review – Retaliation monitoring was conducted and documented in eleven of the twelve sexual abuse investigations reviewed. One sexual abuse investigation was reported when the inmate was at another facility. Retaliation monitoring was documented in nine of the twelve sexual abuse investigations for up to 90 days or more. One unsubstantiated case had three meetings that were documented on the same date, but the initial meeting and the last meeting were 90 days later. One unfounded case also had three meetings documented on the same day, but the last meeting was documented the same date the investigation was determined to be unfounded. Therefore, there were two periodic meetings during the two months monitoring was required until it was unfounded. The Assessment/Retaliation Status Checklist form was used to document the factors that were monitored and if the inmate reported any concerns. It appeared that the staff was monitoring for changes in housing, work, program assignments and new conduct violations.

RECOMMENDATION: It is recommended that the staff who documented multiple meetings on the same date be reminded of the MODOC policy requiring meetings every 30 days for 90-day period.

Retaliation Monitoring Staff Interview – The staff that monitors retaliation said she conducts monitoring for 90 days. She reviews inmate conduct, program assignments, housing assignment changes, and work assignment changes. If she suspects retaliation, she immediately reports the retaliation to her supervisor, the PREA Site Coordinator and the facility investigator. She can continue monitoring beyond 90 days if needed due to individual circumstances.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Monitoring shall include face-to-face status checks.” A staff that conducts

	<p>monitoring said she meets with the victim every 30 days.</p> <p>Retaliation Monitoring Staff Interview - The staff that conducts monitoring said she meets with the victim every 30 days.</p> <p>Documentation Review – Retaliation monitoring was conducted in all eleven investigations reviewed. In the six sexual abuse investigations, retaliation monitoring was conducted with an initial meeting and periodic meetings every 30 days for up to 90 days. One monitoring ended prior to 90 days when the inmate was released.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Reporters and witnesses shall be monitored for retaliation at the minimum of one time utilizing the assessment-retaliation status checklist form. If no retaliation is reported, monitoring will cease.”</p> <p>CORRECTIVE ACTION REQUIRED: Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims. Provide the policy change and documentation of the change in policy and practice being communicated to all PREA Site Coordinators.</p> <p>Corrective Action Completed: The Agency has updated policy D1-8.13 Offender Sexual Abuse and Harassment to now include third-party inmate reporters in face-to-face monitoring meetings for 90 days, aligning with the existing monitoring requirements for inmate victims. Staff who report sexual abuse will undergo 90 days of monitoring and receive a flyer detailing how to report any retaliation to the Warden, PREA Hotline, CLEAR line, PREA Email, or the Office of Professional Standards email. Offenders or staff who cooperate in a sexual abuse investigation as witnesses and express concerns about retaliation will be evaluated and protected from retaliation. This policy revision and its implementation were communicated to the PREA site Coordinators (PCM) by the PREA Unit Manager (PREA Coordinator) on August 23, 2024, via email.</p> <p>Based on the information from interview, policies, documents and corrective actions reviewed, the facility meets the provisions of the standard.</p>
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115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Following an allegation of offender sexual abuse or if an offender is assessed as being at high risk of victimization, the shift supervisor shall ensure the offender is</p>

	<p>housed in the least restrictive housing available to ensure safety. When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.” MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30 day review.</p> <p>The facility reported zero inmates were placed in administrative segregation involuntarily after reporting sexual abuse during the reporting period. There were no inmates in segregation involuntarily at the time of the onsite audit for reporting sexual abuse.</p> <p>Warden Interview – The Warden said inmates that report an incident of sexual abuse would remain in open population housing. If it is not safe for them to remain in open population, he could be placed in administrative segregation until a safe housing alternative can be found. A transfer would be pursued if there was no safe alternative at Algoa CC.</p> <p>Staff that Supervise Segregation – A Unit Manager said he has not had an inmate involuntarily placed in segregation after reporting an incident of sexual abuse. He said the inmate confinement record documents the reason for placement in segregation as the only alternative and the restrictions to privileges, work and programs. A review is conducted in the first week and then at 30 days.</p> <p>The facility meets this standard based on the information from interviews and policies reviewed.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she is immediately contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Facility Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Facility Investigator – The Facility Investigator said he investigates only sexual</p>

harassment allegations. Any allegation that is unclear what type of incident it is, he will do an initial review to determine the type of incident. He said it takes one or two working days to initiate an investigation for a sexual harassment allegation.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Investigators shall receive specialized PREA investigation training prior to conducting an investigation involving offender sexual abuse." The PREA Unit Investigators conduct all of the sexual abuse investigations.

PREA Unit Investigator – The PREA Unit Investigator said she has completed the NIC Sexual Abuse Investigations in a Confinement Setting, the NIC Advanced Sexual Abuse Investigations training and training by VAWA online.

Document Review – NIC training certificates were provided for 12 investigators in the PREA Unit that complete sexual abuse investigations.

The Facility Investigator said he completed the NIC PREA investigations training however when documentation was requested the PREA Unit Manager said he has not completed it as he only conducts sexual harassment investigations. It is recommended that investigators who conduct sexual harassment investigations complete this training also.

c) PREA Unit Investigator Interview – The PREA Unit Investigator said she receives a Request for Investigation from the facility and the PREA Notification Checklist when there is a clear sexual abuse allegation. She said the PREA Unit Investigators conduct administrative and criminal investigations for sexual abuse. She reviews the initial information, reviews video evidence if available, conducts a background investigation of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident. The facility will assist by protecting the scene and the SANE staff collecting evidence through a forensic examination.

d) PREA Unit Investigator Interview – The PREA Unit Investigator said she does not conduct compelled interviews. If a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it by certified mail to document the referral.

e) PREA Unit Investigator Interview – The PREA Unit Investigator said she is not allowed to subject the victim to a truth-telling device. The subject of the investigation could be asked to complete a voice stress analysis. She determines the subject's credibility on a case-by-case basis from the background review of prior criminal history, PREA investigations and conduct.

Facility Investigator – The Facility Investigator said he would not use a truth-telling device on the victim as a condition of continuing an investigation. He has not used a Voice Stress Analysis in a sexual harassment investigation.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Administrative investigations shall include an effort to determine whether staff

	<p>member actions or failure to act contributed to the abuse.”</p> <p>PREA Unit Investigator – The PREA Unit Investigator said she reviews staff actions in relation to the coordinated response plan, policies and procedures. This is documented in the report.</p> <p>g-h) Investigation File Review – there were no criminal investigations conducted during the review period. All investigations reviewed were administrative investigations. The investigations contained a thorough description of physical, testimonial, and documentary evidence. The three that were substantiated did appear to document a criminal violation but did not get referred to the prosecuting attorney. The PREA Unit Manager (PREA Coordinator) said that probable cause was not met. However, the standard requires a substantiated sexual abuse that appears to be criminal to be referred to the prosecutor. There is no probable cause requirement in the standard. Because the three substantiated cases appear to be criminal, they must be referred to the prosecutor for consideration of criminal charges. Documentation of the referral to the prosecutor must be provided.</p> <p>i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Inquiries regarding offender sexual abuse and harassment and all supporting documents shall be retained as long as the alleged perpetrator is incarcerated or employed with the department, plus 5 years and in accordance with the department procedure regarding records retention.”</p> <p>j) PREA Unit Investigator – The investigator mentioned that if a staff member who is under investigation leaves their position before the interview, she will get their contact information from human resources. She will then reach out to request that the staff member return for an in-person interview or conduct the interview over the phone. If they do not respond, she will make several attempts to contact them before proceeding with the investigation.</p> <p>CORRECTIVE ACTION REQUIRED: The three substantiated cases appear to be criminal violations; they must be referred to the prosecutor for consideration of criminal charges. Documentation of the referral to the prosecutor must be provided.</p> <p>Corrective Action Completed: The three cases of sexual abuse were substantiated based on the preponderance of evidence for conduct that appeared to be a criminal violation. The PREA Unit Manager sent the three investigations to the local prosecutor for review. The cover letter to the prosecutor from a PREA Unit Investigator requesting review of the investigation file for consideration of prosecution was provided for each case. Each letter had a received stamp with the date from the county prosecutor’s office.</p> <p>Based on the information from interviews, policies, documents and corrective actions reviewed, the facility meets all provisions of the standard.</p>
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.”</p> <p>Facility Investigator Interview – The Facility Investigator said he uses the evidence standard of preponderance of evidence for administrative investigations he conducts for sexual harassment. He said that means it is more likely than not that the allegation happened as reported.</p> <p>PREA Unit Investigator Interview - The PREA Unit Investigator said she uses the preponderance of evidence standard for the administrative investigations of sexual abuse. More than 50% of the evidence supports substantiated.</p> <p>Investigation Review – Fifteen administrative investigations were reviewed. There were three substantiated investigations that were based on a preponderance of evidence standard.</p> <p>The facility meets this standard based on the information from interviews, policies and investigations reviewed.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon the completion of an offender sexual abuse investigation, the department’s PREA unit shall make written notification to the alleged victim regarding the outcome of the investigation utilizing the applicable PREA alleged sexual abuse by offender notification form or the PREA alleged sexual abuse by staff member notification form.”</p> <p>Warden Interview – The Warden said a written notice of investigation outcome is provided to inmates for sexual abuse investigations for all outcomes.</p> <p>PREA Unit Investigator Interview – the PREA Unit Investigator said she provides the written notification to the facility PREA Site Coordinator (PCM). The PREA Site Coordinator provides the written notification to the inmate. There is a form for sexual abuse by an offender and by staff.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All subsequent notifications shall be made when: Staff member on offender</p>

	<p>allegations: following the completion of the investigation, the offender shall be notified when the following occurs (unless the investigation is unfounded); The staff member perpetrator is no longer assigned to the housing unit; The staff member perpetrator is no longer employed by the department; The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution; A disposition of charges exists related to sexual abuse within the institution.”</p> <p>Investigation File Review - There were five sexual abuse investigations involving staff. The inmate victims in all five were provided a PREA Alleged Sexual Abuse by Staff Member Notification form. Three were unsubstantiated and two were unfounded.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offender on offender allegations: following the completion of an investigation, the offender shall be notified when the following occurs: (1) The offender has been indicted on a charge related to sexual abuse within the institution. (2) A disposition of charges exists related to sexual abuse within the institution.”</p> <p>Investigation File Review - Six sexual abuse investigations involved inmate perpetrators. A PREA Alleged Sexual Abuse by Offender Notification form was provided to the inmate victim in four investigations. Two inmate victims were not notified of the outcome because they were released prior to the completion of the investigation involving an inmate perpetrator.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA unit shall forward the written notification to the offender via the PREA site coordinator. The PREA site coordinator shall ensure that the written notification is provided to the offender in a confidential manner.”</p> <p>Document Review - There were twelve investigations of sexual abuse that concluded during the review period. The inmate victim was notified of the investigation outcome in ten of the twelve sexual abuse investigations that concluded during the review period. The two that were not notified were released.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.76 Disciplinary sanctions for staff	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures.” The policy follows this provision.</p>

	<p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Termination from the department shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse." The policy follows this provision.</p> <p>Investigation File Review – Fifteen investigations were reviewed. There were no substantiated investigations involving staff during the review period. There were no staff disciplined for policy violations for substantiated sexual abuse or sexual harassment of an inmate. One staff was terminated for inappropriate communication with an inmate that did not involve sexual abuse or sexual harassment.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All terminations for violations or the resignation of a staff member, who would have been terminated if not for their resignation, shall be reported to relevant licensing or accreditation bodies and law enforcement." The policy follows this provision.</p> <p>The facility meets this standard based on the information from policies and documents.</p>
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115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies and law enforcement." The policy reflects the provisions of the standard.</p> <p>Warden Interview – The Warden said if a contract staff or volunteer had an allegation of sexual abuse, they would be removed from the facility until the investigation is resolved. If the investigation is substantiated, there would be a permanent restriction from entry for that contractor. A substantiated sexual harassment would be reviewed on a case-by-case basis to determine if removal is appropriate.</p> <p>Document Review – There were no contract staff or volunteers found to be involved in an investigation of sexual abuse or sexual harassment from the investigation file review. The facility reported on the PAQ no contract staff or volunteers being reported to law enforcement or relevant licensing bodies during the review period.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>

115.78	Disciplinary sanctions for inmates
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Auditor Overall Determination: Meets Standard

Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be subject to corrective actions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender-on-offender sexual abuse in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Investigation File Review – Three administrative investigations of inmate sexual abuse were substantiated. The incidents were all nonconsensual sex acts and were not referred for prosecution due to probable cause for a criminal violation not being met per the PREA Unit Manager. All three inmate perpetrators received conduct violations for Forcible Sexual Abuse.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Warden Interview – The Warden said the inmate disciplinary process requires sanctions to be based on the circumstances of the violation, discipline history and progressive. Mitigating factors such as mental health can be considered. Staff check with Mental Health staff prior to the hearing.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The corrective action process shall consider whether an offender's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, shall be imposed in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Warden Interview – The Warden said when considering sanctions for inmate discipline, an inmate's cognitive disabilities and mental health can be used as mitigating factors in sanctioning for sexual abuse and sexual harassment conduct violations.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "If found guilty of sexual abuse, the PREA site coordinator or designee shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."

Medical Staff Interview – Inmate perpetrators will be offered mental health counseling within 60 days of the investigation being substantiated. Counseling is not mandated as a condition of program participation.

	<p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact.”</p> <p>f) Missouri DOC policy IS19-1.6 Offender Accountability Program states “a report of sexual misconduct, made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying.” The policy reflects this provision of the standard.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department prohibits all sexual activity between offenders. Consensual sexual activity between offenders shall not be deemed sexual abuse and shall be addressed in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has experienced prior sexual victimization, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening.”</p> <p>Risk Screening Staff Interview – The staff that conducts risk screening said he offers mental health services to inmates that report being a prior victim of sexual abuse. If the inmate wants to see mental health staff for services, he will complete a referral form and email it to mental health staff.</p> <p>Mental Health Staff Interview – Mental Health staff said she receives referrals for mental health services for inmates that report being prior victims of sexual abuse.</p> <p>Inmate Interviews – Eight inmates were interviewed that reported being a prior victim of sexual abuse said they were offered a referral to mental health. Six inmates said they declined the offer. Two inmates said they accepted the offer and were seen by mental health.</p> <p>Document Review – Nine inmates reported being a prior victim of sexual abuse during the risk assessment. All ten were offered mental health services. Eight inmates declined and two accepted mental health services. This was documented on the risk screening.</p>

	<p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has previously perpetrated sexual abuse, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a mental health practitioner within 14 calendar days of the intake screening.”</p> <p>Document Review – During the review of risk assessments, three inmates were identified as sex offenders or prior perpetrators of sexual abuse. An offer of mental health was documented on the risk assessment.</p> <p>d) Risk Screening Staff Interview - Staff that conduct the risk assessment said the information they gather from inmate interviews and the inmate record to complete the risk assessment is confidential and strictly limited to staff involved in the risk assessment process and review. The risk assessment is completed in an electronic system called MOSIS that staff must be granted access to.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting.”</p> <p>Medical Staff Interview – Medical staff said they cannot share information reported by an inmate about prior sexual abuse that occurred in the community with facility investigators without a signed informed consent from the inmate.</p> <p>Mental Health Staff Interview – The Mental Health staff said inmates are informed of mental health staff duty to report in writing prior to a therapy meeting. If an inmate provides information about an incident of sexual abuse at an institution to mental health staff, the staff must report it to the facility investigator. She said the inmate would have to sign a release for a report of sexual abuse that occurred in the community.</p> <p>The facility meets the provisions of this standard based on interviews, documents and policies reviewed.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional judgment.”</p>

	<p>Medical Staff Interview – Medical staff said inmates that are victims of sexual abuse would be assessed and treated for emergent injuries and instructed not to destroy evidence until a forensic examination can be conducted. The forensic exam can be conducted by the SANE staff from another MODOC facility. SANE trained medical staff are on call. If no MODOC SANE’s are available, the inmate can be taken to a local hospital with a forensic exam department.</p> <p>Inmate Interview – An inmate that reported sexual abuse said he was provided medical treatment and a SANE by medical staff at the facility immediately after reporting. He was also seen by mental health staff a few days after the report was made.</p> <p>Document Review – Medical records for three inmates that reported sexual abuse documented an immediate evaluation and treatment by medical staff. All three were provided a SANE at the facility by qualified SANE medical staff.</p> <p>b) Staff Interviews – All staff said they would protect the victim until the shift supervisor could arrange for additional staff to take the victim to medical or they were instructed to take the victim to medical. The Shift Commander would notify medical about the sexual abuse report. If medical staff were temporarily unavailable, custody staff would wait with the victim until they could be seen by medical.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections by the MODOC SANE staff or by the hospital SANE.</p> <p>Inmate Interview – An inmate that reported sexual abuse said he was offered and given STI testing and treatment.</p> <p>Document Review – Medical records for three inmates that reported sexual abuse documented STI testing and treatment was provided by medical staff at ACC.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
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	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each victim and abuser shall be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals shall be completed for continued care following their transfer to, or placement in, other facilities or their release from custody.”</p> <p>Medical Staff Interview – Medical staff said inmate victims of sexual abuse would be provided follow up treatment on injuries and medication management for STI care.</p> <p>Mental Health Staff Interview – Mental health staff said victims of sexual abuse would be offered treatment services based on trauma informed care.</p> <p>Inmate Interview – An inmate that reported sexual abuse said he received medication follow up for STI treatment and prevention.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims and abusers shall be provided with medical and mental health services consistent with the community level of care.”</p> <p>Mental Health Staff Interview – Mental health staff said the victim would be provided mental health services similar to services offered in the community.</p> <p>Medical Staff Interview – The medical staff said the medical services provided are consistent to the services offered in the community.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections. If the inmate goes to a local hospital, the SANE there would conduct the testing and ACC medical staff would follow up on the medication.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse.”</p>

	<p>Mental Health Staff Interview – Mental health staff said therapies that focus on what pushes them to abusive behavior would be provided to the inmate perpetrators.</p> <p>The facility meets the provisions of this standard based on information from interviews and policies reviewed.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.</p> <p>Document Review – The facility provided fifteen completed administrative investigations for review from the audit review period. There were no criminal investigations during the review period. Twelve of the fifteen were investigations of sexual abuse with three substantiated, six unsubstantiated and three unfounded. Incident reviews were documented on a PREA Sexual Abuse Incident Debriefing form for all substantiated and unsubstantiated investigations. The three unfounded were not reviewed.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.</p> <p>Document Review – Nine completed PREA Sexual Abuse Incident Debriefing forms were provided with the investigation files for review. The PREA Sexual Abuse Incident Debriefing forms document the incident review. All nine sexual abuse incident reviews were completed ordinarily within 30 days of the investigation conclusion.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The review team for offender sexual abuse events shall include the PREA site coordinator, and other upper level administrators, when applicable, with input from the shift supervisor, investigators, and medical or mental health practitioners.” The policy reflects this provision of the standard.</p> <p>Warden Interview – The Warden said the incident debriefing team consisted of the Deputy Warden (PCM), Investigator, medical staff, mental health staff, and shift</p>

	<p>supervisor.</p> <p>Document Review –The nine PREA Sexual Abuse Incident Debriefing forms documented the members of the review team. The Deputy Warden, Health Services Administrator, Mental Health Director, shift supervisor (captain or lieutenant) and Investigator participated in all reviews.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA sexual abuse incident debriefing report shall be completed by the PREA site coordinator outlining in detail the findings of the incident debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse incident debriefing form.” The form requires the review team to answer questions for the five factors in this standard.</p> <p>Warden Interview – The Wardens said the debriefing team looks at the response of staff to the report; barriers or blind spots where the incident occurred; factors that may have contributed to the incident, such as sexual orientation or gender identity of the victim, the victim’s charges, gang affiliation of an inmate subject, or race; staffing levels; and video camera deployment.</p> <p>PREA Compliance Manager and Incident Review – An Assistant Warden is designated as the PREA Site Coordinator or PCM for Algoa CC. He schedules the reviews as needed. The team can consist of the DW, medical staff, mental health staff, Investigator, shift supervisor or first responder involved with the incident. He documents the review on the form and provides a copy to the Warden and PREA Coordinator. All evidence is reviewed including written statements by the victim, witnesses, investigator interview notes, and watching video if available. If corrective actions are identified, they are documented on the form and coordinated with the Warden for completion or documented why it cannot be completed.</p> <p>Document Review –The nine PREA Sexual Abuse Incident Debriefing forms documented a review of physical barriers, possible motivating factors, staffing levels, monitoring technology, and policy or practice change.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The facility shall implement the recommendations for improvement, or shall document its reasons why recommendations shall not be implemented.” The policy reflects this provision of the standard.</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Annual Site Report: Each facility shall utilize information from the offender sexual abuse incident debriefings to prepare an annual report to be submitted to the department’s PREA manager by the last working day in March.” The policy provides the definitions for sexual abuse and sexual harassment in section II. The definitions are equal to the definitions in the PREA standards. The agency requires the facilities to track PREA incidents and provide a summary of the data in an annual PREA report.</p> <p>Document Review – The 2023 ACC PREA Annual Report was reviewed. The report provided a summary of the 2023 PREA investigations and a comparison of the data between 2022 and 2023.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions.”</p> <p>c) Missouri DOC Annual PREA Report – The 2022 and 2021 MODOC PREA Annual Reports were reviewed. The reports provided a table of data broken down by incident type and outcomes. This data can be used to complete the Survey of Sexual Victimization summary report.</p> <p>Document Review – The Missouri DOC Survey of Sexual Victimization was completed for 2022.</p> <p>d) PREA Coordinator Interview – The PREA Coordinator said all information and data from incidents of sexual abuse and sexual harassment are retained in the Investigative Reporting Intelligence System.</p> <p>f) PREA Coordinator Interview – The PREA Coordinator said he uses the data and incident information for substantiated investigations from the Investigative Reporting Intelligence System to complete the Survey of Sexual Victimization when it is requested.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions. a. The report shall include: (1) a

	<p>comparison with prior year's data, (2) corrective actions, and (3) an assessment of the department's progress in addressing offender sexual abuse.”</p> <p>2021 & 2022 PREA Annual Report – The PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>Agency Head – The Division Director said incident data is used to assess and improve housing assignments, video monitoring and staffing levels. Additional training is provided to staff through PREA Unit staff speaking at basic training courses.</p> <p>PREA Coordinator – The PREA Coordinator said the annual report compares data since 2013 and summarizes ongoing corrective action.</p> <p>PREA Compliance Manager Interview – The PREA Site Coordinator/DW said the facility provides the facility data on its annual PREA report that the agency uses to complete the agency PREA report.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department's annual PREA report shall be made available to the public on the department's internet website.”</p> <p>Agency Head – The Division Director said the Director approves the report prior to posting it on the department’s website.</p> <p>Document Review – The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. Though the Agency Head Designee said the reports are reviewed and approved by the Director, the reports are not signed by the Director either electronically or by signature. It is recommended that the annual report be signed by the Director or designee each year.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The CAO or designee, PREA manager or department director shall edit specific material from the reports when publication would present clear and specific threat to the safety and security of a facility. The CAO or designee, PREA manager, or department director shall indicate the nature of the material edited.”</p> <p>PREA Coordinator – The PREA Coordinator said personally identifying or confidential information about incidents are not included in annual reports.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>PREA Coordinator – The PREA Coordinator said the PREA incident information is securely stored in the Investigative Reporting Intelligence System (IRIS). Access to IRIS is limited to investigators, PREA Site Coordinators, Warden’s and other staff directly involved in incident investigation and review.</p> <p>Missouri DOC Annual PREA Report - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The last two years of PREA Annual Reports were reviewed and found to have a comparison of sexual abuse data from 2013 to 2022. The reports did not contain any personal identifiers.</p> <p>The facility and agency meet this standard based on the information from the PREA Coordinator interview and review of annual reports found on the MODOC PREA webpage.</p>
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115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. Algoa Correctional Center was audited three years ago. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all of their facilities during all audit cycles.</p> <p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with inmates in a private room with a window for observation by staff.</p> <p>A notice of audit was posted throughout the facility six weeks prior to the onsite audit notifying inmates they could send confidential correspondence to this auditor. No letters were received prior to the onsite audit from inmates.</p>

115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>All of the final reports for PREA audits are posted on the Missouri DOC PREA webpage at https://doc.mo.gov/programs/PREA. Completed PREA audit re[ports for every facility have been posted on this page since 2014.</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	no

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	no
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	no

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a) Use of screening information		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b) Use of screening information		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c) Use of screening information		
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)	
	<div data-bbox="320 185 1273 555"> <p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div>

PREA Facility Audit Report: Final

Name of Facility: Crossroads Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 08/09/2024

Date Final Report Submitted: 11/11/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 11/11/2024

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	06/10/2024
End Date of On-Site Audit:	06/12/2024

FACILITY INFORMATION	
Facility name:	Crossroads Correctional Center
Facility physical address:	1115 E Pence, Cameron, Missouri - 64429
Facility mailing address:	

Primary Contact

Name:	Joseph Drake
Email Address:	Joseph.drake@doc.mo.gov
Telephone Number:	8167245393

Warden/Jail Administrator/Sheriff/Director

Name:	Christopher Brewer
Email Address:	Christopher.Brewer@doc.mo.gov
Telephone Number:	8166322727

Facility PREA Compliance Manager

Name:	Joseph Drake
Email Address:	Joseph.Drake@doc.mo.gov
Telephone Number:	

Facility Health Service Administrator On-site

Name:	Betrina Randall
Email Address:	Betrina.Randall@doc.mo.gov
Telephone Number:	8166322727

Facility Characteristics

Designed facility capacity:	1400
Current population of facility:	1251
Average daily population for the past 12 months:	1250
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males

Age range of population:	19 through 85
Facility security levels/inmate custody levels:	C1 Minimum through C5 Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	405
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	88
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	30

AGENCY INFORMATION

Name of agency:	Missouri Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2729 Plaza Drive, Jefferson City, Missouri - 65109
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102
Telephone number:	5737512389

Agency Chief Executive Officer Information:

Name:	Trevor Foley
Email Address:	Trevor.Foley@doc.mo.gov
Telephone Number:	573-526-6607

Agency-Wide PREA Coordinator Information

Name:	Darren Snellen	Email Address:	darren.snellen@doc.mo.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

1

- 115.53 - Inmate access to outside confidential support services

Number of standards met:

44

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-06-10
2. End date of the onsite portion of the audit:	2024-06-12

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	YWCA of St Joseph Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1400
15. Average daily population for the past 12 months:	1250
16. Number of inmate/resident/detainee housing units:	6
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit**Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit**

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1253
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	79
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	1
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	3
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	6
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	22
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	72

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	15
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	49
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	1
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	428
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	38

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	34
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	20
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<div> <input type="checkbox"/> Age </div> <div> <input type="checkbox"/> Race </div> <div> <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmates were selected randomly by dividing the population total at the time of the onsite audit by twenty to get an interval number, then using the interval number to select inmates from a list by housing unit.

56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	21
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	4
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1

62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	3
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	5
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	8
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	6

69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	There were no inmates involuntarily placed in segregation for being high risk of victimization or reporting sexual abuse. The staff that supervise segregation said they have not had an inmate placed in segregation involuntarily for a PREA report.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	16
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No

78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☒ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☒ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☐ First responders, both security and non-security staff
- ☒ Intake staff

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?

☒ Yes

☐ No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes

☐ No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

☒ Yes

☐ No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

88. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="checked" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY	
Sexual Abuse and Sexual Harassment Allegations and Investigations Overview	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	20	0	20	0
Staff-on-inmate sexual abuse	6	1	6	0
Total	26	1	26	1

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	1	0	1	0
Staff-on-inmate sexual harassment	20	0	20	0
Total	21	0	21	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	1	1	1	1	0
Total	1	1	1	1	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	7	4	9	0
Staff-on-inmate sexual abuse	3	2	0	1
Total	10	6	9	1

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	1	0
Staff-on-inmate sexual harassment	1	3	15	1
Total	1	3	16	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

14

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	9
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	4
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	7
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

7

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- ☒ The audited facility or its parent agency
- ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- ☐ A third-party auditing entity (e.g., accreditation body, consulting firm)
- ☐ Other

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment is the policy that provides the zero-tolerance policy, definitions of sexual abuse and sexual harassment, and the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy meets the requirements for this provision of the standard.</p> <p>b) Based on the organization charts provided, the Missouri Department of Corrections has a PREA Coordinator in the Office of Professional Standards that reports to the Director of that division. The Director of OPS then reports to the MODOC Director. This places the PREA Coordinator in an executive level position that meets the standard.</p> <p>PREA Coordinator Interview – The PREA Coordinator said he has sufficient time and authority to fulfill the duties of the PREA Coordinator for the agency. He oversees the PREA Unit that consists of dedicated investigators and support staff that assist him in managing and monitoring PREA standards compliance and PREA investigation at all</p>

	<p>facilities in the agency. Each facility has a PREA Compliance Manager that reports to him for PREA Compliance matters.</p> <p>c) Document Review – An organizational chart was provided for CCC. The PREA Site Coordinator (PREA Compliance Manager) is a Deputy Warden that reports directly to the Warden.</p> <p>PCM Interview – The Deputy Warden said he has the time and authority to complete the requirements of being the PREA Compliance Manager for CCC. He is responsible for monitoring PREA compliance in addition to his other duties as the Deputy Warden of Offender Management. He has assistance from other staff as well.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>It was reported on the PAQ that the Missouri Department of Corrections currently does not contract for the confinement of inmates with a private or other governmental agency. The PREA Coordinator stated in his interview the Missouri DOC is not contracting with anyone for confinement of inmates at this time. The PCM stated in his interview the Crossroads Correctional Center does not contract for the confinement of inmates.</p>

115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires each facility to “maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse.” “The staffing plan shall consider the facility’s physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.”</p> <p>Document Review – a 2024 Staffing Plan Review document was provided for review. The review of the staffing plan was developed based on generally accepted detention practice, internal and external reviews, a review of blind spots, composition of the</p>

inmate population, the number of supervisory staff, the programs on each shift, and the prevalence of substantiated and unsubstantiated incidents of sexual abuse.

There were no judicial findings, federal investigations, state or local regulations that required adjustments to the staffing plan. There were no other factors that required adjustments. The staffing plan consisted of the security post analysis and the facility organization chart.

Tour Observations – All areas of the facility were toured including housing units, recreation, medical, foodservice, education, maintenance, intake clothing issue, paint shop, laundry, and visiting room. Staff were observed in all areas of the facility monitoring inmates. Staffing levels provided appropriate monitoring of inmates in housing units and all program/service areas. Showers were in individual stalls with half doors that provided appropriate modesty screens while allowing monitoring by staff. Cameras were in the dayroom area between cell ranges that covered the entire area. Cameras were observed covering blind spots in recreation rooms, the warehouse, kitchen, classrooms, library, and maintenance shops. Mental health and medical offices where inmates would meet with staff had windows to allow for staff walking by to observe staff and inmate interaction. Classrooms all had windows to allow for security staff to observe the classrooms during rounds in the main hallway. The maintenance building was outside the perimeter. A small number of inmates were allowed to work there and were under direct staff supervision.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall comply with the staffing plan on a regular basis, deviations from the staffing plan shall be documented and justification for deviations noted.”

The facility reported no deviations from the staffing plan on the PAQ.

Warden Interview – The Warden said she has weekly meetings to monitor the staffing levels and hiring to fill vacancies. The meetings are with the Chief of Custody, Human Resources and the PREA Site Coordinator. A staffing analysis was conducted in 2009 by NIC and another was conducted the MODOC in 2019. She explained the facility closed in 2019 and moved to a closed facility next door to repair damage from a disturbance. The population was then moved back in December of 2022 to CRCC.

The previous staffing plan was used from prior to the move. The Warden said they are using non-custody staff and overtime to ensure the staffing plan is not deviated from. The Chief of Custody provides her with a report on staffing in addition to getting the shift reports.

PCM Interview - The PREA Site Coordinator/Deputy Warden said he meets with the Warden and HR for the annual staffing plan review. Staffing is also reviewed throughout the year on a weekly basis. He monitors the staffing on the shift reports. Vacancies are monitored to ensure they are being filled. Deviations from the staffing plan have not occurred in the last year. Deviations from the staffing plan would be closing mandatory security posts and implementing emergency procedures.

Overtime is always utilized to cover a mandatory post due to absences from call offs. They have also been using non-custody staff that were prior custody to cover shortages as well to ensure they do not deviate from the mandatory posts.

	<p>c) Document Review – The staffing plan review included an evaluation of the video monitoring system and whether additional resources were needed for staffing plan compliance.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each institution shall ensure the classifications of lieutenant or above conduct and document unscheduled and unannounced rounds to identify and deter offender sexual abuse and sexual harassment. Each facility shall ensure that rounds occur periodically in all areas of the facility. Staff members shall be prohibited from alerting other staff members that these rounds are occurring. The rounds shall be documented and readily accessible during audits as outlined in the facility's standard operating procedure.” The policy reflects the requirements for this provision of the standard.</p> <p>Document Review – Shift summary reports were requested for random dates in February and March of 2024 to review for documentation of unannounced rounds. The reports had unannounced rounds by supervisors documented on each shift. The facility also provided shift summary report examples for each month in 2023 through the PAQ. These had unannounced rounds by supervisors documented on each shift as well. Unannounced rounds were conducted by lieutenants and captains.</p> <p>Intermediate Staff Interview – A Shift Supervisor said he conducts an unannounced round daily in a portion of the facility and covers the whole facility in a week. He said the rounds are documented in housing unit chronological logs and the shift summary.</p> <p>Random Staff Interviews – All staff interviewed said they see shift supervisors and assistant shift supervisors making rounds several times per week.</p> <p>Inmate Interviews – Inmates were asked if they see supervisors making rounds. Most said they see sergeants daily. Most inmates said they see captains and lieutenants in the housing unit a few times per week.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.</p>
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115.14 Youthful inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “A youthful offender will not be placed in a housing unit in which he will have sight, sound, or physical contact with any adult offender through use of a shared day room or other common space, shower area, or sleeping quarters in accordance with the institutional services procedure regarding offender housing assignments.”

	The PREA Coordinator stated Crossroads Correctional Center does not house youthful inmates. All youthful inmates are housed at Farmington Correctional Center in a special unit. None of the inmates interviewed were under 18 years of age.
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri Department of Corrections policy IS20-1.3 Searches prohibits cross gender strip searches except in exigent circumstances. Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment also prohibits cross-gender strip searches except in exigent circumstances. The facility reported on the PAQ that no cross-gender strip searches occurred in the past 12 months. The policies reflect the requirements of the provision of this standard.</p> <p>The facility reported on the PAQ there were no cross-gender strip or cross gender visual body cavity searches during the review period. If there were a cross-gender strip search under exigent circumstances, it would be documented on a form 931-4701 per policy.</p> <p>c) Missouri DOC policy IS20-1.3 Searches requires staff to document all cross-gender strip searches on the cross-gender search form. There was no cross-gender strip search forms presented for review. The policy reflects the requirements for this provision of the standard.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with, institutional services, and probation and parole procedures regarding searches." The policy also requires staff of the opposite gender to announce their presence prior to entering a housing unit. These announcements are to be logged in the housing unit chronological log. The policy reflects the requirements for this provision of the standard.</p> <p>Tour Observations - Opposite gender staff announcements were observed during the tour. Opposite gender staff announcements were documented in housing unit logs as PREA Announcements. Signs indicating female staff are on the unit are hung up for hearing impaired inmates. Showers were in single shower stalls with a half door that provided an appropriate modesty screen. In administrative segregation, the showers were in individual stalls with expanded metal doors that had a solid privacy barrier in the middle of the door. Solid barriers provided the inmate with enough coverage of private areas without completely blocking staff's ability to monitor for safety. Toilets were in cells with a small window in the door. All bathrooms outside of the housing units were in small single toilet rooms with a door that did not lock and had a window</p>

or a partition that allowed monitoring but no cross-gender viewing. Staff allow and monitor access to the inmate bathrooms in maintenance and vocational shops.

Random Staff Interviews – Twelve staff were selected at random from shift rosters for interviews. All staff said they felt like the inmates could shower and use toilet facilities with enough privacy that staff could not see their genitals or buttocks. All staff were aware of the requirement for opposite gender announcements. All staff said they hear opposite gender staff make announcements when entering housing units or announcements are made for them.

Document Review – Housing unit logs were requested for random dates in February and March 2024. PREA announcements were observed documented when female staff entered housing units or took over a shift in a housing unit.

Inmate Interviews – Inmates said they hear the announcements for female staff entering the housing unit. Some said the announcement on the PA system can be inaudible, but they see the signs and know it is for female staff being present. Inmates said they can use the showers and toilets without being seen by female staff in all the housing units.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not perform strip or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, diagnostic center reception and orientation, and receiving screening intake center.” Missouri DOC policy IS20-1.3 Searches prohibits staff from performing a strip search for the sole purpose of determining an inmate’s gender. The policies reflect the requirements of the provision of this standard.

Random Staff Interviews – All staff said they strip searching a transgender inmate solely for determining their genital status was prohibited by policy, not allowed and would be unprofessional.

Inmate Interview - Four inmates that identify as transgender said they had not been strip searched only to determine genital status since being at the facility.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Custody staff members shall be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs.” The policy reflects the requirements for this provision of the standard.

Random Staff Interviews – The staff randomly selected for interview said they had been trained how to do cross gender pat searches and pat searches of transgender inmates. Female staff said they have done cross gender pat searches of inmates and have not conducted any cross-gender strip searches. The search described for transgender inmates was like the search of a female inmate.

Inmate Interviews – Inmates said they have been pat searched by female staff. They

	<p>felt the search was appropriate and professional. None said they had been subjected to a cross-gender strip search. Four transgender inmates said pat searches by staff were not intrusive and appropriate.</p> <p>Document Review – Search training completion documentation was provided for ten staff hired in the last year.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires staff to “provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” LEP inmates will be provided the PREA video transcript and PREA brochure in their native language. If these cannot be translated into their native language, the PREA site coordinator will utilize an interpreter to assist the inmate in understanding the material. “Offender interpreters shall not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.”</p> <p>Intake Staff Interview – Intake staff said the facility has some staff designated as interpreters. She said the facility had an interpretive service by telephone that could be used when staff cannot interpret. The PREA brochure is in Spanish or can be provided in several other languages. If an inmate cannot read, the PREA brochure is read by staff. A video is shown that provides the information through audio for visually impaired inmates and with closed captions for hearing impaired inmates. If an inmate cannot read, she reads the brochure to them. If an inmate cannot hear, she can communicate with them in writing. Inmates with cognitive disabilities will receive the PREA education individually from staff to ensure they understand the material.</p> <p>Random Staff Interviews – The staff interviewed either knew or thought there was an interpretive service the facility could use for LEP inmates. They said the shift supervisor would be notified when it was needed and could access it. They also knew there were some staff that could translate a few languages. None of the staff said it would be appropriate to use an inmate to translate for an LEP inmate.</p>

	<p>Inmate Interviews – There were two inmates with hearing impairment identified by the facility for interview. Both had the ability to hear with hearing aids and could hear my questions. There was one inmate the facility identified as having a visual impairment. The inmate said the staff read the PREA brochure to him and explained how to make reports. There were two Limited English proficient inmates interviewed at the facility during the onsite audit. They both did not want an interpreter and said they could understand English. They both could explain how to make a report if needed.</p> <p>The facility meets this standard based on the information from interviews, and policies reviewed.</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not hire or promote any person, staff member, or enlist the services of any contractor that may have contact with an offender when it is known that he: a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or c. has been civilly or administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse.”</p> <p>Document Review – Applications for four staff that were promoted in the last 12 months were provided to review questions pertaining to this standard. All four had been asked questions that meet the standard.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background screening, candidate selection, maintenance of employee records, employee discipline, and labor organizations.”</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before hiring new staff members a worksite personnel staff member or designee shall: a. perform a criminal background records check; and b. attempt to contact all prior institutional employers, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background screening.”</p>

Human Resource Staff Interview - HR staff said criminal background checks and pre-employment background checks are completed for all new hires and promotions. She reviews prior discipline issues that would include sexual harassment. Issues with sexual harassment history would be considered in hiring and promotion decisions. If applicants have prior corrections experience, a supervisor calls the prior employer for a pre-employment PREA check to inquire about substantiated sexual abuse investigations or resignations during a sexual abuse investigation. This is all documented on the form by the supervisor.

Document Review - Records were reviewed for ten staff hired in the last year. Eight had a criminal background check completed prior to their hire date. Two were not received as of the interim report. These need to be provided for review or a new check completed to meet the standard. All applicants are asked on the MODOC application if they have ever worked or volunteered for a prison, jail, lockup, community treatment center, mental health facility, alcohol or drug rehabilitation center, juvenile facility or other correctional facility. If they answer yes, a Pre-Employment PREA Check form is completed by staff that call the prior employer to ask if the applicant has ever had a substantiated sexual abuse or sexual harassment investigation or resigned during an investigation. There was one newly hired staff that had worked at a corrections institution prior to working at Crossroads CC.

Documentation of the Pre-Employment PREA Check was provided that supported compliance with the standard.

d) Missouri DOC policy D2-2.2 Background Investigations states "Contract staff members, volunteers, and student interns shall have a background investigation conducted that consists of the criminal history check and any violations that have been reported to pertinent professional licensing and/or certification organizations if applicable."

Human Resource Staff Interview - HR staff said criminal background checks are conducted for all contract staff prior to working at the facility. The criminal background checks are conducted by the Warden's Executive Assistant. The completed criminal background checks are retained in the HR office.

Document Review - Criminal background checks were requested for ten medical contract staff and five foodservice contract staff. Documentation of completed criminal background checks was not received at the time of the interim report.

Completed criminal background checks for the ten selected medical staff and five foodservice contract staff must be provided or a new criminal background check must be completed to document compliance with this provision.

e) Missouri DOC policy D2-11.14 Annual Employment Requirements Section III. A requires an annual criminal background check to be completed on the birth month of every employee.

Human Resource Staff Interview - HR staff said she requests a criminal background check be completed on staff annually during their birth month. A criminal background check for contract staff is also completed annually during the birth month.

	<p>Document Review – Criminal background checks for ten current staff were requested. All ten were completed in the last year or less.</p> <p>f) Human Resource Staff Interview – HR staff said new hire staff and staff applying for promotions are asked questions about (a) 1-3 of this standard on applications for employment. Staff are not required to complete a self-evaluation annually and are not asked these questions again.</p> <p>Document Review – The questions required by this standard are asked on all applications for the Missouri DOC. The applications for ten staff hired in the last 12 months were reviewed. Eight had questions on the application that asked about prior convictions or civil judgments for sex offenses and prior sexual abuse in an institution. Two had not been received as of the interim report. Documentation of</p> <p>g) Missouri DOC policy D2-2.2 Background Investigations states “False information regarding substantiated allegations of offender or resident abuse and/or harassment on the employment application shall be grounds for termination.”</p> <p>h) Human Resource Staff Interview – HR staff said if another correctional institution contacts the Missouri DOC to inquire about substantiated allegations of sexual abuse or resignations during investigations of a former employee, they will provide information on the substantiated sexual abuse or resignations.</p> <p>The PREA Coordinator for MODOC provided four examples of PREA information being released upon request to other corrections agencies during the last 12 months.</p> <p>CORRECTIVE ACTION REQUIRED: The criminal background checks and questions for a) 1-3 must be provided for two of the newly hired staff. The criminal background checks for ten medical contract staff were not provided for review. The criminal background checks for the ten medical contract staff and five food service contract staff must be provided for review. If the facility does not have the documents, new criminal background checks must be completed on the selected contract staff that are missing.</p> <p>Corrective Action Completed: Documentation of completed criminal background checks was provided for ten contract medical staff and four contract food service staff. The employment application with the required questions for a) 1-3 were provided and reviewed. All documents meet the standard.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of the standard.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>a) The facility reported on the PAQ no substantial expansion or modification since the last PREA audit.</p> <p>Agency Head Interview – The Director said the agency designs expansion and modifications to maximize the agency’s ability to protect inmates.</p> <p>Warden Interview – The Warden said there have been no expansions or modifications to the facility since the last PREA audit.</p> <p>b) Warden Interview – The Warden said some cameras were updated to digital. Changes to the video monitoring system are made with the goal of improving inmate monitoring based on the requirements of the PREA standards being considered in the design.</p> <p>PCM Interview –The PREA Site Coordinator/DW said some of the cameras were upgraded to HD with better monitoring abilities. Cameras are used as a deterrent in blind spots and can aid in an investigation.</p> <p>The facility meets the standard based on the information from interviews and observations.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” The policy also instructs staff to take steps to protect evidence. This may include instructing the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom. If possible, staff should not allow the inmate perpetrator to destroy evidence by preventing showering, changing clothes, eating, drinking, or using the bathroom.</p> <p>Random Staff Interviews – All staff interviewed were asked what their responsibilities are in protecting evidence. All staff said they would ask the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom until evidence can be collected by a SANE at a forensic exam or they are relieved. Staff would ensure the alleged inmate perpetrator would not destroy evidence in the same way. All said they would protect evidence at the scene until it could be collected by investigators. They would not collect the evidence themselves unless under the direction of an investigator.</p> <p>b) MODOC policy D1-8.13 provides a time frame of 72 hours for possible collection of forensic evidence the same as found in the National Protocol for Sexual</p>

Assault Medical Forensic Examinations. This reflects the time frame given in the National Protocol. +

c) MODOC policy D1-8.13 requires the facility health services staff to contact the on-call SANE staff member if the alleged incident occurred within 72 hours. The policy states "The SANE staff member shall collect evidence according to established forensic procedures for processing and document the exam and finding in the applicable department computer system." "If the alleged perpetrator is a staff member, the victim shall be transported to the community emergency room for a sexual assault examination to be performed by a SANE or SAFE." If the alleged perpetrator is an inmate, the shift supervisor shall contact the on call SANE staff member and hold the victim in medical until the SANE staff arrive. The facility reported 3 forensic exams conducted in the past 12 months.

SANE Staff Interview – A facility nurse from Crossroads Correctional Center was interviewed as a regional SANE. She is on-call for Western MODOC facilities along with three other SANE staff. She is certified as a forensic exam nurse from completing an online course. She said the forensic exam can be conducted from 72 hours up to 96 hours depending on the type of sexual abuse that occurred and if the person washed, showered, changed clothes, went to the bathroom, or had anything to eat or drink.

SANE Supervisor – The Centurian Nursing Director/SANE said she covers the eastern region and is on call to conduct forensic exams when needed. She said there are eleven trained SANE nurses for the MODOC with five in the eastern region, two in the central region and four in the western region. If she or other SANE staff are not available, the inmate would be transported to a nearby hospital ER with forensic exam services.

Document Review - Medical records for two inmates that reported sexual abuse documented an immediate evaluation and treatment by medical staff. Both were provided a forensic examination at the facility by qualified SANE medical staff.

Document Review – Documentation of a forensic examination was provided for two inmates that reported sexual abuse that occurred in a time frame that allowed for DNA evidence collection. The examinations were completed on the same day the inmate reported the sexual abuse.

d-e) The facility has staff that have attended victim advocate training provided by the Missouri Coalition Against Domestic Violence to qualify them to provide victim advocate services for inmates at CRCC. The training certificates were provided for the Chaplain and one other staff.

PCM Interview – The DW/PREA Site Coordinator said the Chaplain and one staff have completed online training that qualifies them as victim advocates. Both can provide victim advocate services for an inmate victim at the investigation interview and at a forensic examination.

Inmate Interview – An inmate that reported sexual abuse was offered a victim

	<p>advocate by the investigator and declined. This was also documented in the investigation report. The inmate requested a victim advocate after the examination and saw the victim advocate qualified staff.</p> <p>h) The facility has staff that have attended victim advocate training provided by the Missouri Coalition Against Domestic Violence to qualify them to provide victim advocate services for inmates at CRCC. The training certificates were provided for the Chaplain and one other staff.</p> <p>The facility meets the provisions of this standard based on the information from interview, policies and documents reviewed.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment."</p> <p>Agency Head Interview - The Director of the Office of Professional Standards was the Agency Head designee for interview and is responsible for the PREA Unit in the office of Professional Standards. He said investigations are completed for all allegations of sexual abuse and sexual harassment in all facilities. The PREA Unit conducts investigations of sexual abuse allegations and the Institutional Investigators conduct investigations of sexual harassment.</p> <p>The facility reported on the PAQ seventy-four allegations of sexual abuse and sexual harassment during the last 12 months, seventy-four resulting in administrative investigations and 1 being referred for criminal investigations. The PREA Coordinator provided list of sexual abuse and sexual harassment investigations for the review period that totaled forty-six. There were twenty staff sexual harassment, six staff sexual abuse, nineteen inmate sexual abuse and one inmate sexual harassment investigations. Nine investigations were still ongoing. Twenty completed investigation files were selected for review. All twenty were administrative investigations. Seven allegations of harassment were referred to the facility Investigator. Fourteen allegations of sexual abuse were referred to the PREA Unit Investigators. There were twenty investigations that were administrative investigations and one criminal investigation.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment." This policy was found posted on the Prison Rape Elimination Act page</p>

	<p>of the Missouri DOC website at https://doc.mo.gov/programs/PREA. Policy D1-8.4 Institutional Investigations covers requirements for investigations in general. The policy is identified as confidential, therefore it cannot be posted on the MODOC website.</p> <p>PREA Unit Investigator Interview - The PREA Unit Investigator said she is contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Facility Investigator Interview - The Facility Investigator said she investigates only sexual harassment allegations. If a PREA report is clearly an incident of sexual abuse, a Request for Investigation is completed and sent to the PREA Unit. If the allegation is sexual harassment it is referred to her, the Institutional Investigator. If it is not clear what type of incident is being reported, the Facility Investigator gathers more information to determine if it is sexual abuse or sexual harassment. Once it is determined to be sexual abuse, it is referred to the PREA Unit Investigator by completing an RFI and sending it to the PREA Unit in the Office of Professional Standards. An RFI was completed for sexual abuse investigations reviewed.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.31	Employee training
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall receive initial PREA training during the department's basic training."</p> <p>PREA Basic Training Curriculum - The PREA Basic training curriculum was provided for review. It covers the zero-tolerance policy of MODOC; staff responsibilities in prevention, detection, reporting and response procedures; inmate's rights to be free of sexual abuse, sexual harassment and retaliation; staff rights to be free from retaliation; dynamics of sexual abuse; reactions of victims; how to detect signs of sexual abuse; avoiding inappropriate relationships with inmates; and mandatory reporting laws. The curriculum did not cover professional communication with LGBTI inmates. However, The Professional Boundaries lesson plan was provided for review that provides staff information on how to communicate effectively and professionally with LGBTI inmates. This training is all provided at the Basic Academy in a pre-service training for new hires.</p> <p>Staff Interviews - Staff said they completed the PREA Basic Training at the MODOC Academy. Staff could demonstrate knowledge of zero tolerance policy, rights of</p>

inmates and staff, how to detect signs and response of sexual abuse, the dynamics of sexual abuse, avoiding inappropriate relationships with inmates, and their actions in response to a sexual abuse report.

Document Review – Training completion documents were requested for ten staff hired in the last 12 months. Eight were received and show completion just after the hire date. Two were not received as of the interim report.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the time of assignment.”

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All staff members shall complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. Years in which an employee is not required to complete training, the facility site coordinator shall provide refresher information on current sexual abuse and sexual harassment policies.”

PREA Refresher #1-12 – After the PREA Basic is completed at academy, staff are required to complete a PREA Refresher training modules every two years. These modules were reviewed and found they did not cover the required topic in (a) 10 mandatory reporting for victims under 18 and vulnerable adults. Topics (a) 1-9 are covered in the refresher training.

Staff Interviews – staff said they complete a PREA Refresher training every 2 years and receive emails monthly between trainings that provide information about responding to reports, detection of sexual abuse, and other information from the PREA Refresher training curriculum as well as policy updates for PREA. Staff demonstrated knowledge of all required topics except mandatory reporting laws.

The PREA Refresher training curriculum was updated with information added that covers mandatory reporting to outside agencies for victims under 18 and victims that are vulnerable adults. The revised curriculum will be used for staff completing training going forward. The new material was provided to all staff at the facility via email from the PREA Site Coordinator. A copy of the revised training material and the email sending it to all CRCC staff was provided.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All completed PREA training requires a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed the training. This form must be routed through the facility training officer or regional training coordinator.”

Document Review – Ten veteran staff records for PREA training completion were requested. Eight PREA training completion records showed training was completed within the last two years. Two were not received at the time of the interim report.

	<p>CORRECTIVE ACTION REQUIRED: training completion records for two new hire staff and two veteran staff must be provided for review. If they cannot be provided, the staff must complete the training and completion records must be provided for review.</p> <p>Corrective Action Completed: The facility provided the PREA training completion documents for the two veteran staff. The PREA Site Coordinator said the two new staff resigned prior to completing their training.</p> <p>Based on the information from the interviews, policies and documents reviewed, the facility meets the provisions of the standard.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All part-time employees, volunteers, and contract staff members shall receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training."</p> <p>Training Curriculum – The PREA training curriculum for volunteers and contractors was provided for review. The curriculum provides volunteer and contract staff with the MODOC zero-tolerance policy, rights of inmates, signs of sexual abuse, MODOC's response process, dynamics of sexual abuse, reactions of victims, and how to respond to a report of sexual abuse. The Offender Work Release training curriculum was also provided for review. This training is provided to other Missouri state employees for supervision of CRCC inmates on outside work crews. The training provided information about what is an incident of sexual abuse or sexual harassment, how to detect and respond to sexual abuse or sexual harassment of an inmate.</p> <p>Contract Staff Interviews – Three contract staff were interviewed from foodservice, medical and mental health. All three said they had received training that covered the policy for zero tolerance of sexual abuse and sexual harassment, how to detect and respond to incidents of sexual abuse or sexual harassment.</p> <p>c) Document Review – PREA training completion documents were requested for five volunteers, ten medical contract staff and four foodservice contract staff. Documentation for seven medical/mental health contract staff showed they had completed the PREA training. Training completion documents were not received at the time of the interim report for three medical contract staff, four foodservice contract staff and five volunteers. The facility must provide documentation for the missing contract staff and volunteers completing the training.</p> <p>CORRECTIVE ACTION REQUIRED: PREA training completion documentation for three medical contract staff, four foodservice contract staff and five volunteers has not</p>

	<p>been provided. The facility must provide documentation for the three medical contract staff, four foodservice contract staff and five volunteers completing the training.</p> <p>Corrective Action Completed: The facility provided the PREA training documents for the four foodservice contract staff. The facility also provided PREA training completion documents for two contract medical staff. One of the contract medical staff resigned and could not complete the training. The facility did not have a record of prior training completion because the prior contract vendor did not leave the records for the staff that stayed to work for the new contract vendor. It is recommended that the facility keep a copy of the training records for contract staff in their own file. The facility provided PREA training completion records for the four volunteers previously selected for review. One volunteer was removed from the program for not completing the training. The facility provided the PREA training completion records for the remaining twenty volunteers to show all volunteers at CRCC have completed the training.</p> <p>Based on the information provided from interviews, policies and documents reviewed, the facility meets the provisions of the standard.</p>
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115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” The policy requires the facility to have the PREA offender brochure in several recognized languages. If the brochure is not available in the inmate’s language then an interpretive service will be utilized to provide the information. The PREA offender brochure was provided in seven additional languages. The policy also requires the facility to make PREA reporting information available or visible to all inmates through posters, the offender rulebook, tablets and the brochure. Policy requires the inmates to sign an acknowledgement receipt for viewing the video and receiving the PREA offender brochure.</p> <p>Inmate Interviews – Forty inmates were interviewed. Some of the inmates said they were transferred to an empty facility next door after a disturbance and then were brought back after the facility had been repaired and reopened in November of 2022. The inmates that came to CRCC in November of 2022 in a mass movement said they were no given a PREA education. Inmates that arrived after November of 2022 said</p>

they received the PREA education information in a brochure and video on the first or second day at the facility. Staff explained the information and asked if they had any questions. All inmates interviewed said they see the PREA reporting information posters throughout the facility and the hotline phone number spray painted on the walls in the housing units by the phones. All forty inmates knew several ways to make a report of sexual abuse or sexual harassment.

Intake Staff Interview - The Case Manager that provides the PREA education at the Reception and Orientation Unit said he provides the PREA education information the first day or second day the inmates are at the facility. He shows the video at the intake area. He said he meets with the inmates individually to ensure they understand the information if they have disabilities. If an inmate is LEP, the facility can access a telephonic interpretive service. He also can provide the brochure in several other languages. If an inmate has a hearing disability, the video has closed captioning, and he can write questions to enable communication. If an inmate cannot read, he reads the information to them. He explains the zero-tolerance policy, inmate rights, anonymous reports to the Crime Victim Unit, calling the PREA hotline, telling any staff, writing any staff, and victim advocacy services available at the facility.

Tour Observations - A PREA education was observed during the onsite audit. The PREA information video was shown and then the inmate met individually with a Caseworker to go over the information and then conduct the risk assessment. While touring the intake area, the PREA education process was explained by the PREA Site Coordinator/DW. PREA posters were observed throughout the facility in inmate housing units, program areas, recreation areas, dining hall, medical waiting area and inmate work areas. The posters provided information on how to report sexual abuse and sexual harassment and were printed in English and Spanish. They were placed at a height and in a print size that inmates could easily read. The PREA brochure was provided in both English and Spanish. The brochure provides inmates with information on what is an incident of sexual abuse or sexual harassment, the zero-tolerance policy for MODOC, prevention of sexual abuse, reporting sexual abuse and sexual harassment, and victim rights. The PREA hotline phone number was spray painted on the wall next to the inmate phones in large size letters that were easy to see.

Document Review - Documentation for PREA education was requested and reviewed for twenty inmates after the onsite audit. Nine inmates arrived after November of 2022. Six inmates that arrived after November of 2022 signed documents showing the PREA education was completed the same day or the day after intake. Three documents provided were for a date of arrival at FRDC, not CRCC. The PREA education completion documents for eleven inmates were from their first arrival at CRCC before the mass move to WMCC or they were for arrival at WMCC. There were no PREA education documents for the mass move from WMCC next door to CRCC.

CORRECTIVE ACTION REQUIRED: Inmates that arrived during the mass movement in November of 2022 did not get a PREA education. PREA education documents for three inmates that arrived after the mass movement from WMCC were from FRDC, not CRCC. An additional sample of PREA education documents will be reviewed to

	<p>ensure current practice meets the standard.</p> <p>Corrective Action Completed: The facility provided PREA education completion documents for forty-two inmates that arrived in August, September and October of the corrective action period. All were completed the same day as arrival.</p> <p>Based on the information from interview, policies and documents reviewed, the facility meets all provisions of the standard.</p>
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115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators assigned to investigate offender sexual abuse allegations shall receive specialized PREA investigator training.” The policy reflects the provision’s requirement.</p> <p>Training Curriculum – The NIC PREA: Investigating Sexual Abuse in a Confinement Setting was reviewed by this auditor. The training covers the investigation standards, Miranda, Garrity, evidence collection, forensic examinations, interviewing techniques,, understanding the victim, and evidence requirements for substantiating administrative cases or for making a prosecutorial referral. The curriculum covered the requirements of the standard.</p> <p>PREA Unit Investigator Interview – A PREA Unit Investigator and Crossroads CC Investigator were interviewed. The PREA Unit Investigator said she completed the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting and the advanced NIC investigations course. She also has completed sexual abuse investigation training through VAWA as well.</p> <p>Document Review - The NIC PREA Investigations training certificates were provided for the twelve PREA Unit Investigators.</p> <p>The facility meets the standard based on the information from interviews, documents and policies reviewed.</p>

115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states</p>

"Health services staff members shall receive specialized PREA medical and mental health training."

Training Curriculum – The Centurian PREA Overview training curriculum was provided for review. The curriculum is medical contractor's specialized medical training that all medical and mental health staff complete. The curriculum comes from Relias training. The training curriculum provides information about what is sexual abuse and sexual harassment; how to detect and assess sexual abuse and sexual harassment; preserving physical evidence; how to respond and communicate with victims; how medical and mental health staff are to report any knowledge or suspicion of sexual abuse and sexual harassment. The training curriculum covers the requirements of this provision of the standard.

b) Medical Staff Interview – The medical staff interviewed said she has completed specialized medical training through Centurian. She said all medical staff complete annual PREA training. The specialized medical training covers how to detect and assess signs of sexual abuse and sexual harassment, what medical staff can do to preserve physical evidence, responding to victims, and who to report allegations or suspicions to. She said she has also completed the PREA training for contract staff as well.

Mental Health Staff Interview – The mental health staff interviewed said she receives specialized medical training through Centurian annually and has completed the PREA training for contract staff. The training has a trauma informed approach. The training covered protection of evidence, signs of sexual abuse, communication with victims, and reporting sexual abuse and sexual harassment.

c) The facility provided documentation of the specialized medical training for ten randomly selected medical and mental health staff. All ten had completed the training in the last year.

d) The facility provided documentation of PREA training completion for seven of the ten randomly selected medical and mental health staff. More than one request was made for the three records. The facility must provide the training for the three staff or have them complete the training and provide the documentation.

CORRECTIVE ACTION REQUIRED: Training completion records for three medical staff must be provided. If the facility does not have the records, the staff must complete the training and document the completion.

Corrective Action Completed: The facility provided PREA training completion documents for two contract medical staff. One of the contract medical staff resigned and could not complete the training. The facility did not have a record of prior training completion because the prior contract vendor did not leave the records for the staff that stayed to work for the new contract vendor. It is recommended that the facility keep a copy of the training records for contract staff in their own file.

Based on the information from interviews, policies and documents reviewed, the facility meets all provisions of the standard.

115.41	Screening for risk of victimization and abusiveness
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1469 667">a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All offenders shall be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding offender housing assignments, transgender and intersex offenders and the probation and parole procedures regarding housing assignments, transgender and intersex clients, and contracted residential facilities.” The policy requires an assessment for risk of victimization and abusiveness.</p> <p data-bbox="256 701 1469 902">b) Missouri DOC policy IS5-2.3 Offender Internal Classification states “CCMs will conduct a new internal classification within the first 72 hours at that facility and the offender will be housed in accordance with the new internal classification score.” The policy requires a new risk assessment to be completed within 72 hours of arrival at the facility.</p> <p data-bbox="256 947 1469 1059">Risk Screening Staff Interview – The staff that conduct risk screening said all inmates that arrive at Crossroads CC are screened within the first two days of arrival for risk of victimization and risk of abusiveness.</p> <p data-bbox="256 1104 1469 1339">Inmate Interviews – Nineteen out of forty inmates interviewed said they could recall meeting with a Case Manager privately and being asked questions about prior victimization, sexual orientation, gender identity, disabilities, and their views of vulnerability to sexual abuse in the first or second day in the intake area. Twenty-one of the inmates interviewed arrived at CRCC in the mass movement from Western Missouri CC in 2022. They did not recall being asked questions for the assessment.</p> <p data-bbox="256 1384 1469 1541">Document Review – A sample of five initial assessments for inmates that reported being a prior victim were reviewed and found to be completed within 72 hours. Additional assessments will be reviewed in the corrective action period for (d) and (e).</p> <p data-bbox="256 1574 1469 1910">c) Missouri DOC policy IS5-2.3 Offender Internal Classification states “Facilities shall assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities.” The risk assessment was provided for review. The factors in the assessment were found to be objective.</p> <p data-bbox="256 1944 1469 2067">d) Risk Screening Staff Interview – The staff that complete the risk screening said she provides the assessment questions to the inmate on a form and then she meets with inmates in private in the intake area to go over the questions to gather</p>

information to complete the risk screening. The questions are about prior sexual abuse victimization; prior sexual abuse perpetration; feelings of vulnerability to sexual abuse; cognitive and physical disabilities; identifies as or is perceived to be LGBTI or gender nonconforming. She also reviews the inmate record for additional information on criminal history, conduct history for violence or sexual abuse, age, size description, sex offenses, and violent offenses.

Document Review - The Internal Classification Risk Assessment was reviewed and found to assess risk of victimization for the following factors: disabilities, age, inmate build, prior incarceration, prior conviction for sex offense with a Child victim, LGBTI or Gender non-conforming, prior victim of sexual abuse, and perception of vulnerability.

Inmates are not detained solely for civil immigration in the MODOC. The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet this provision of the standard.

e) Document Review - The Internal Classification Risk Assessment was reviewed and found to assess risk of abusiveness for the following factors: prior sexual abuse – prior conviction for sex offense with Adult victims; prior convictions for violent offenses – prior convictions for violent crimes; history of prior institutional violence or sexual abuse – conduct for violent offenses past 10 years and conduct violation for murder or forcible sexual conduct older than 5 yrs but less than 10 yrs. Though there is assessment for prior sexual abuse involving adults, not assessing for sex offense convictions with child victims does not assess for any or all prior sexual abuse. The time restriction on forcible sexual conduct prevents assessing for that conduct that is outside of the timeframe. This doesn't assess for all prior sexual abuse while incarcerated. This does not meet this provision of the standard.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be reassessed within 30 days of arrival. The reassessment shall consider additional relevant information received by the facility after the initial intake screening."

Risk Screening Staff interview – Staff said she meets with inmates three weeks after intake to complete the reassessment of the risk screening. She asks the same questions for the reassessment that were asked for the intake assessment. She completes a whole new assessment based on the inmate's answers and the information from the inmate record.

Inmate Interviews – Nineteen inmates that arrived after the mass movement from WMCC said they were asked the same questions from the intake meeting a second time about a month later.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender's risk level shall be reassessed when warranted due to a referral, incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness."

Risk Screening Staff Interview – Staff said if new information is received that changes

the answers to the last screening, a new assessment is completed. If there is a substantiated incident of sexual abuse, a Case Manager will do a new assessment as well.

h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender shall not be disciplined for refusing to answer or not disclosing complete information during the assessment."

Risk Screening Staff Interview – Staff said inmates do not have to answer the questions for the risk screening and refusing to answer will not result in discipline. They are encouraged to answer the questions.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The chief administrative officer (CAO) or PREA site coordinator shall control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders."

PREA Coordinator Interview – The PREA Coordinator said information obtained for the risk assessment is confidential and access to the electronic system the assessments are completed in is controlled and limited to the staff that need to complete assessments and the staff involved in reviewing them.

CORRECTIVE ACTION REQUIRED: The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet provision (d). There is assessment for prior sexual abuse involving adults, however not assessing for sex offenses with child victims does not assess for any or all prior sexual abuse. This does not meet provision (e). The time restriction on forcible sexual conduct prevents assessing for that conduct that is outside of the timeframe. This doesn't assess for all prior sexual abuse while incarcerated. The internal classification risk assessment must be modified to meet provision (d) and (e). Once the modification is approved, training documentation on the new assessment with staff that conduct assessments shall be provided. Completed assessments must be provided for review of use within required time frames in the standard. A sample of intake and 30 days assessments over a two month period will be requested.

Corrective Action Completed: The intake dates were provided for the inmates selected for assessment review at the onsite audit. Four out of thirteen intake assessments were not completed within 72 hours and three out of thirteen reassessments were not completed within 30 days. A new sample of assessments was reviewed for correct time frames during the corrective action period.

The MODOC PREA Coordinator and Director of Office of Professional Standards said the risk assessment is completed in an electronic computer system that will take more time to modify than is allowed in the corrective action period. As a result, an agreed upon corrective action was developed. The process to complete the assessment was modified by using comment sections in the current assessment to document changes in what is being assessed on specific factors until the MODOC can make permanent changes to the assessment in the electronic system. There were

	<p>changes to five factors being assessed on the current assessment that had been identified as not meeting the standard.</p> <ul style="list-style-type: none"> • Adult victim was added to victimization question 14 for prior sex offense convictions. A comment will be added for scoring Adult victim in addition to the current Child victim. • Exclusively non-violent criminal history factor in the victimization section will be scored as an override when the answer is No to question 17 in the risk of abusiveness section that scores convictions for crimes of violence. If the answer is No and the victimization section score is 2 points, the staff will complete an override to a Sigma (risk of victimization) in number 20 for the inmate having a non-violent criminal history. Non-violent criminal history will be placed in the comment section. • Child victim was added to risk of abusiveness question 16 in addition to Adult victim. The comment Child Victim is added if the answer is Yes and the victim is a child. • Staff were instructed not to follow the time limitations on questions 18 and 19. A Yes response will be given for any institutional conduct history for violence or sexual abuse with comments added to document the information being outside of the time frames. <p>The changes were added to the training manual for the risk assessment and training was provided to the staff that complete risk assessments at CRCC on August 30, 2024, by the PREA Unit Manager (PC). The new assessment process was put in place at CRCC following the training. A sample of 72-hour intake assessments and 30-day reassessments completed during September were provided for review each week. A total sample of twenty intake assessments and twenty-one reassessments were reviewed for use of the new process. All were completed in the correct time frames and using the new process for scoring. The MODOC will continue to work on the changes in the electronic risk assessment that makes these changes permanent.</p> <p>The facility meets the provisions of this standard based on information from corrective actions, interviews, policies and documents reviewed.</p>
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115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those</p>

offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This shall be in accordance with the institutional services procedures regarding offender housing assignments, transgender and intersex offenders, offender recreation and activities, and probation and parole procedures regarding community supervision centers, the community release center, and contracted residential facilities.”

Missouri DOC policy IS5-2.3 Offender Internal Classification states “The department utilizes an internal classification system to assist department staff members in determining appropriate housing, programs, and work assignments of offenders to ensure offender safety, institutional security, and compliance with the Prison Rape Elimination Act (PREA) guidelines.” This policy provides the procedures for completing the PREA risk assessment. The risk assessment is used to guide the placement of inmates in housing assignments and programs. Inmates that are high risk of victimization (Sigma) are not housed in the same room with inmates that are high risk of abusiveness (Alpha).

The facility has a housing assignment report with the internal classification identified on the report. This allows staff to monitor placement based on Sigma, Alpha or Kappa (no risk). A copy of the report for CRCC was provided. There were an equal number of inmates with risk of victimization and risk of abusiveness. The inmates with risk of victimization are housed in a wing of a housing unit away from inmates with risk of abusiveness.

Missouri DOC policy IS18-1.1 Required Activities requires housing unit staff to utilize internal classification information to designate required assignments for the purpose of keeping separate and/or ensuring appropriate monitoring of inmates at high risk of being sexually victimized from inmates that are at high risk of being sexually abusive when working or attending programming together.

The policies meet the requirements of this provision of the standard.

PREA Compliance Manager Interview – The PREA Site Coordinator said the Sigmas are housed on their own wings and Alphas are housed on other wings. They are never in the same cells. An Assistant Warden runs a report with the flags from the offender information system to monitor for correct placement weekly.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive.”

c) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee is responsible for determining a permanent housing assignment for each transgender or intersex offender, and prior to this assignment shall meet with each offender to determine his vulnerability within the general population and length of time living as the acquired gender. Transgender and intersex housing assignments shall not be made based solely on genitalia but must

consider the offender's health and safety and the security of the facility through a review of the respective classification, medical and mental health records."

Missouri DOC policy IS5-3.3 Transgender and Intersex Offenders provides the process for review of an offender that has identified as transgender or intersex at the risk assessment. The staff that conduct the risk assessment notify the PREA Site Coordinator of the transgender or intersex identification. The Transgender Committee consists of the PREA Site Coordinator, medical administrator, mental health chief, and medical director. The Transgender Committee has an initial meeting with the offender. The offender then meets with Mental Health to be reviewed for gender affirming items, hormone therapy treatment consideration, and discuss health and safety concerns. The Transgender Committee completes the Transgender Committee Review form and forwards it to the Transgender Review Team in central administration. The Transgender Review Team consists of the PREA Coordinator, deputy division director, director of rehabilitative services.

PREA Compliance Manager Interview - The PREA Site Coordinator said the facility has a facility transgender committee that meets with an inmate that identifies as transgender at the risk assessment or at any time while housed at CRCC. The committee consists of the medical and mental health directors, classification staff and unit management staff. The committee reviews the transgender inmate's views of safety in the facility housing placement and program/work assignments. The committee also reviews gender affirming items, showering separately and the potential for hormone therapy. He said the Transgender Committee Review form is completed and sent to the Transgender Review Team in central administration for review and final decision.

Documentation of Transgender Committee Reviews was requested for inmates that identified as transgender at the risk assessment. Thirteen inmates were received in the last 12 months that identified as transgender. All thirteen met with the Transgender Committee in the first week after arrival. All were asked their views of safety in their facility housing placement, programs and if they wished to shower at different times from other inmates.

d) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee shall meet with the offender within 10 working days of either the offender's arrival to the facility or upon learning the offender's transgender or intersex status and every 6 months thereafter."

PREA Compliance Manager - The PREA Site Coordinator (DW) said the Transgender Committee would meet with an inmate that identifies as transgender every six months to conduct a review of the inmate's feelings of safety, facility housing assignment, work assignment or program assignment and any concerns about showers.

Document Review - Ten of the transgender inmates had a second meeting with the Transgender Review Committee 6 months after arrival. Two had not been at the facility long enough for the second meeting.

	<p>e) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee review shall include the following: (1) Offender’s view of his vulnerability.”</p> <p>Risk Screening Staff Interview – The staff that conducts risk screening said the Transgender Committee completes all reviews with inmates that identify as transgender. She informs the PREA Site Coordinator when an inmate identifies as transgender.</p> <p>PREA Compliance Manager Interview – The PREA Site Coordinator said the Transgender Committee meets with the inmate to ask for their views of safety.</p> <p>Transgender Inmate interview – Thirteen inmates were received in the last 12 months that identified as transgender. All thirteen met with the Transgender Committee in the first week after arrival. All were asked their views of safety in their facility housing placement, programs and if they wished to shower at different times from other inmates.</p> <p>f) PREA Compliance Manager – The PREA Site Coordinator (DW) said the Transgender Review Committee asks transgender inmates if they want to shower while other inmates in the housing unit are in their cells.</p> <p>Transgender Inmate Interview – Four transgender inmates said separate showers was offered and one chose not to shower at a separate time. Three were showering at a separate time.</p> <p>g) Transgender Inmate Interview – Four transgender inmates interviewed said they are not housed in a unit that is dedicated to transgender, gay or bisexual inmates.</p> <p>Documentation of Transgender Committee Reviews was requested for inmates that identified as transgender. Thirteen inmates were received in the last 12 months that identified as transgender. All thirteen met with the Transgender Committee in the first week after arrival. All were asked their views of safety in their facility housing placement, programs and if they wished to shower at different times from other inmates.</p> <p>The facility meets the provisions of this standard based on the information from interviews, policies and documents reviewed.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “When an offender is believed to be in substantial risk of victimization, the shift supervisor shall

	<p>assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.”</p> <p>MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30 day review.</p> <p>Staff Who Supervise Segregation - A Unit Manager that supervises the segregation unit said if an inmate is placed in segregation involuntarily for being high risk of sexual victimization the reason would be documented in the inmate confinement report (TASC) along with the restrictions. He said a classification review of placement in administrative segregation is completed during the first week and then again at 30 days. The review will document that there are no alternative housing options and the restrictions while in segregation. He said the goal is to get the inmate back into population within 5 days or place them on protective custody status. If an inmate cannot be placed safely in open population, they can review the possibility of transfer to another facility. He said some program course work can be completed while in segregation. Most privileges would be restricted.</p> <p>Warden Interview – The Warden said if an inmate is determined to be at high risk for sexual abuse from the assessment at intake, the intake staff would try to find the safest housing assignment in general population. Involuntary segregation would only be used as a last choice. A transfer to another facility would be considered if the inmate cannot be in the general population.</p> <p>None of the inmates interviewed in segregation during the onsite audit said they were involuntarily placed there due to being a high risk for victimization from the outcome on the risk assessment or reporting sexual abuse.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request (IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline, and d. advocacy agency.” The methods of reporting are communicated to inmates</p>

in the PREA offender brochure provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC, report to any staff, or calling the PREA hotline.

Random Staff Interviews – Staff said inmates can report sexual abuse, sexual harassment or retaliation by calling the PREA hotline, telling any staff, writing any staff, filing a grievance, or having family make the report. Most knew inmates could write to the Crime Victims Unit and be anonymous.

Inmate Interviews – All inmates said they can report retaliation, sexual abuse or sexual harassment by telling any staff, writing staff by dropping a “kite” in the mailbox on the housing unit or calling the PREA hotline. Inmates said they thought they could make an anonymous report by not putting their name on the written report and dropping it in the mailbox. Some were aware of the anonymous report to an external organization they saw on a poster. Some inmates said they could file a grievance. All inmates were aware of multiple ways to make a report of retaliation, sexual abuse or sexual harassment.

Investigation File Review – Twenty investigations were reviewed. The reports of sexual abuse and sexual harassment in the cases were received through grievances, anonymous letters, third party inmate or family reports, verbal reports to staff or writing staff.

Tour Observations – PREA posters with information telling inmates how to make a report of sexual abuse and sexual harassment were observed in every housing unit dayroom next to the inmate phones, recreation areas, the dining hall, education classrooms, and clothing issue at intake. The information was also posted in areas where inmates wait for commissary orders or medical appointments. The posters were placed where they could easily be read. The PREA hotline phone number was spray painted with stencil on the walls next to the offender phones.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail and not subject to examination.” The policy requires an external reporting method that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure.

PCM Interview – The PREA Site Coordinator/DW (PCM) said inmates can report to the Department of Public Safety by writing to the address on the posters and in the PREA brochure. This correspondence is treated as privileged and cannot be read or censored. Inmates can leave their name off the envelope and correspondence if they want to remain anonymous.

Document Review – the facility provided a copy of the MOU between the Missouri DOC and the Missouri Department of Public Safety that was signed in 2013 and is ongoing until it is deemed unnecessary by either party. The MOU provides the responsibilities for each organization in receiving and processing written

	<p>correspondence from MODOC inmates and residents regarding allegations of sexual abuse and sexual harassment. The MOU requires the correspondence to be immediately forwarded to the DOC, allowing the inmate to remain anonymous.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure."</p> <p>Random Staff Interviews - Staff said they are required to take any verbal, written, anonymous or third-party report. When they receive a verbal report, they are required to document the report and the steps they follow providing the information as required in a written incident report. This report must be turned in immediately or prior to leaving the shift.</p> <p>Inmate Interviews - Inmates said they can make a report privately by calling the PREA hotline from the offender phones or on their tablet or telling their Case Manager.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct." The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.</p> <p>Random Staff Interview - Staff said they could privately report information about sexual abuse or sexual harassment by calling the ethics line or the PREA hotline. They could also complete an IOC and email it to a supervisor or talk to their supervisor in private. Posters for the ethics line (CLEAR Line) were observed in staff break areas and PREA Hotline posters are throughout the facility.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>b) Missouri DOC policy D5-3.2 Offender Grievance states "The department shall not impose a time limit on when an offender may submit a complaint regarding an allegation of offender sexual abuse." "The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff</p>

members, an alleged incident of offender sexual abuse.” “Nothing in this section shall restrict the agency’s ability to defend against an offender lawsuit on the ground that the applicable statute of limitations has expired.” The policy allows for any complaints regarding sexual abuse to bypass the informal process and proceed immediately to grievance stage.

c) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.”

d) Missouri DOC policy D5-3.2 Offender Grievance states “Offender grievances alleging sexual abuse shall be processed as follows: If determined to be a non-emergency the CAO or designee shall respond within 30 calendar days of receipt. Non-emergency offender grievance appeals alleging offender sexual abuse shall be processed as follows: a response shall be provided as soon as practical, but no later than 60 calendar days of receipt. Computation of the 60 day time period shall not include the days between the offender’s receipt of the offender grievance response and receipt of the offender grievance appeal by the offender grievance unit at central office. Appeals shall be referred to the deputy division director or designee. An extension of time to respond, of up to 70 calendar days, may be claimed if the normal time period for response is insufficient to make an appropriate decision. The offender shall be notified in writing of such extension and shall be provided a date by which a response shall be provided. During the administrative process, including the offender grievance appeal level, if the offender does not receive a response within the time allotted for a reply, including extension, the offender may proceed to the next level of the offender grievance process.”

The facility reported twenty-two grievances filed in the last 12 months that alleged sexual abuse. There was one investigation reviewed that was reported by the inmate filing a grievance to report sexual harassment. There were no sexual abuse investigations that were reported by the inmate victim filing a grievance.

e) Missouri DOC policy D5-3.2 Offender Grievance states “Third Party Reporting: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, shall be permitted to assist offenders in filing requests for grievances or appeals relating to allegations of offender sexual abuse. This assistance cannot interfere with the safety and security of the institution. When a staff member receives the documentation from the reporting third party, it shall be attached to the grievance form and shall immediately be recorded in accordance with this procedure. A copy of the documentation shall also be forwarded to the CAO or designee in order to be attached to the possible investigation or inquiry. The CCM shall attempt to discuss the issue with the offender (victim) prior to developing a response to confirm if the alleged victim agrees to have the request filed on his behalf. If the offender declines to have the request processed on his behalf, the CCM shall document the offender’s decision and the complaint shall be considered withdrawn for grievance purposes.”

f) Missouri DOC policy D5-3.2 Offender Grievance states “If the CAO or the PREA

	<p>site coordinator determines that the complaint meets the definition of a PREA emergency grievance, the grievance shall be addressed as follows: The CAO or designee shall prepare an initial response which shall be attached to the grievance and provided to the offender within 48 hours of receipt of the initial filing date. The offender shall sign and date the response. A final response from the CAO or designee shall be provided to the offender within 5 calendar days from the initial filing date. The offender shall sign and date the form. The initial and final response for the grievance shall document the department's determination whether the offender is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance."</p> <p>The facility reported on the PAQ there were no emergency grievances received in the last 12 months.</p> <p>g) The facility reported no disciplinary action against an inmate for filing a grievance alleging sexual abuse in the past 12 months.</p> <p>The facility meets this standard based on the information from interviews, documents and policies reviewed.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Exceeds Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall offer alleged victims of offender sexual abuse, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, during the investigative process. When an allegation of sexual harassment is forwarded for investigation, the alleged victim of sexual harassment will be offered a victim advocate. Offenders shall be allowed to communicate with an advocate by mail or special visit in a confidential manner as possible to maintain safety and security of the institution."</p> <p>Inmate Interviews - Inmates were aware there were services available for victims of sexual abuse through the victim advocate staff at the facility. Most inmates knew there might be a victim advocate organization outside of the facility that they could write to that they see on posters.</p> <p>Tour Observations - During the tour, Victim Advocate posters were observed in housing unit dayrooms and other areas inmates frequent. The posters contain the addresses for Just Detention International and Rape, Abuse and Incest National Network.</p> <p>Victim Advocate Interview - A victim advocate qualified staff said she completed online training and an in class training with the Missouri Coalition Against Domestic</p>

Violence. She is notified by the shift supervisor if there is an incident of sexual abuse reported and will report to the facility during off hours. She said the training was trauma centered and covered victim care and the process of the forensic examination. Conversations with the victim are confidential unless there is information provided that is a safety or security concern. She said she can provide victim advocate services for a forensic exam at the facility by a MODOC SANE or at the hospital. She also provides victim advocate services for the victim during investigator interviews if requested.

Victim Advocate Interview – A victim advocate from the YWCA was called to conduct to verify the MOU with WRDCC. The YWCA staff said there would be training provided to staff and residents can call a hotline for services. If a VA needs to see a resident, they will arrange a special visit through the PREA Site Coordinator. She said the YWCA will provide victim advocate services to residents at a forensic examination or at the investigator interview at CRCC.

In the review of twenty investigation files, victim advocate services were offered to the victim in all twenty reports of sexual abuse and sexual harassment. Victim advocate services were also offered to the victim by the investigator prior to the interview in sexual abuse investigations.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before being given access to a victim advocate, the offenders shall be informed of the extent to which communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory reporting laws.”

Document Review – Victim Advocate posters have a statement at the bottom informing inmates that letters to the victim advocate organizations are subject to examination by staff.

Victim Advocate – This auditor contacted Just Detention International to ask if correspondence has been received from an inmate at the Crossroads Correctional Center during the review period. A response was received stating there had been no correspondence received from an inmate at Crossroads CC.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If a facility is unable to enter into a MOU with the advocacy center, the attempt shall be documented and advocacy services shall be provided by a qualified staff member.”

PREA Coordinator Interview – The PREA Coordinator said he is communicating with the Missouri Coalition Against Domestic Violence to attempt to obtain an MOU for victim services for all Missouri DOC facilities through correspondence or a hotline.

The facility exceeds the provisions of this standard by providing inmates access to victim advocates both in the community and through qualified staff based on information from interviews, documents and policies reviewed.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Facility Tour - Posters were observed during the tour in the visiting room that provide visitors with information for reporting sexual abuse and sexual harassment to the PREA Unit of the Missouri DOC. The mailing address, email address and telephone number are on the poster. The poster informs family and friends that the MODOC has zero tolerance for sexual abuse and sexual harassment. The poster says "Friends, family or anyone outside of the facility may report sexual abuse or sexual harassment for an offender." These posters were also observed in the dayrooms of all housing units.</p> <p>MODOC PREA Webpage - The Missouri DOC PREA webpage provides information under the Friends and Family section for reporting sexual abuse and sexual harassment by calling, writing or emailing. This was observed at https://doc.mo.gov/programs/PREA.</p> <p>Inmate Interviews - Inmates said their family could report an incident of sexual abuse or sexual harassment for them by calling the number in their PREA brochure. Some said they see posters that say their family can report and how.</p> <p>A test report was sent on the PREA email prior to the onsite audit. A message was received back in two days acknowledging the message was received the same day it was sent. A test report was made to the PREA hotline after the onsite audit. The Missouri DOC PREA Coordinator emailed back acknowledging receiving the call within 24 hours.</p> <p>The facility meets the standard based on information from observations and interviews.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Failure to report offender sexual abuse is a Class A misdemeanor in accordance with Missouri state statute. All staff members, shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure."</p>

Staff Interviews – Staff said they are required by state law and by the zero-tolerance policy to immediately report any knowledge or suspicion of sexual abuse or sexual harassment of an inmate or retaliation against an inmate or staff. They also said they would have to report if they were aware of staff failing to report any knowledge or suspicion of sexual abuse or sexual harassment.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions.”

Staff Interviews – All staff said any information from a report of sexual abuse or sexual harassment could not be shared with co-workers or staff that are not involved in the response to or investigation of the incident.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health staff members shall inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes.”

Medical Staff Interview – Medical staff said inmates are notified of their duty to report any information the inmate reveals about an incident of sexual abuse that occurred in a correctional institution. They have the inmate sign a form at intake that tells them about the duty to report and limits of confidentiality.

Mental Health Staff Interviews - Mental Health staff said they notify inmates of their duty to report information about sexual abuse in an institution each time they provide services.

Document Review – PREA Healthcare Duty to Report forms were provided for review for ten inmates received during the review period. The form documents the notice to inmates that medical and mental health staff have a duty to report any information of sexual abuse and sexual harassment that occurred in an institution to medical or mental health staff during the initiation of services

d) A search on the internet found reports of sexual abuse of a vulnerable adult must go to Adult Protective Services at the Department of Health and Senior Services.

PCM Interview – The DW PREA Site Coordinator said sexual abuse incidents involving an inmate under 18 must be reported to Social Services and sexual abuse of a vulnerable adult must be reported to Senior Services.

e) Warden Interview – The Warden said all reports of alleged sexual abuse are referred for investigation to the PREA Unit. All allegations of sexual harassment are referred for investigation to Crossroads CC Institutional Investigator.

The facility meets the standard based on information from interviews, policies and documents reviewed.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, shall immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist.” The facility reported zero incidents of imminent risk of sexual abuse in the past 12 months.</p> <p>Agency Head Interview – The Division Director said the facility would immediately remove an offender from a situation that is a substantial risk of imminent sexual abuse. The facility could move the offender to another work, program, housing assignment or place the offender in protective custody and transfer to another facility.</p> <p>Warden Interview – The Warden said if they learn an inmate is in imminent risk of sexual abuse, staff are instructed to stay with the inmate, the shift supervisor will immediately identify the alleged perpetrator and remove them from the alleged victim that made the report. If the perpetrator cannot be identified, the inmate that reported may have to be moved to another housing unit or administrative segregation. They try to keep the inmate victim in the least restrictive housing if they can.</p> <p>Staff Interview – All staff said if an inmate reported an incident of sexual abuse or being in imminent risk of sexual abuse, they would immediately take the inmate to a safe place and stay with him while they report to their supervisor and the shift supervisor.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving an allegation that an offender was sexually abused while confined at a facility outside of the department, the CAO or designee or the appropriate office shall ensure the outside facility is notified of the allegation within 72 hours. The CAO or designee shall maintain documentation of the allegation received and when the outside facility was notified with the allegation.”</p>

	<p>Warden Interview – The Warden said if an inmate reports an allegation of sexual abuse that occurred at another facility, he will have the DW/PREA Site Coordinator send the information to the other facility head for their investigation within 72 hours. The inmate would be offered medical and mental health services, victim advocacy services and be monitored for retaliation. The facility would assist investigators at the other facility/agency by arranging an interview with the alleged victim.</p> <p>The facility reported on the PAQ two allegations reported by an inmate alleging they were a victim of sexual abuse at another facility during the review period. Documentation of the report and communication to the other facility were provided.</p> <p>d) Warden Interview – The Warden said if he receives a report about an incident of sexual abuse that occurred at CRCC from another facility head that was reported by a former CRCC inmate, he would follow normal procedures and assign it for investigation.</p> <p>Three investigations reviewed were in response to reports of sexual abuse that were received from other MODOC facilities. All three reports were immediately referred to the PREA Unit for investigation through an RFI. The PREA Unit Investigator conducted the investigation and coordinated with the other facility to conduct the interview of the alleged victim.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “In the event of an allegation of a penetration act, the first responder shall take the following steps: (1) Ensure the safety of the victim. (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable. (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (4) The shift supervisor shall make telephone notifications and respond as outlined in the facility’s coordinated response to offender sexual abuse protocol.”</p> <p>Random Staff Interviews - Security Staff said if an inmate reports being sexually assaulted they would instruct the victim to not change clothes, shower, brush teeth, eat drink, smoke or use the restroom in order to protect evidence from being destroyed. Non-security staff said they would instruct the victim not to change clothes, shower, brush teeth, eat drink, or use the restroom to protect evidence from</p>

	<p>being destroyed. They would then notify security staff, specifically the shift commander's office, and wait for security staff to come take custody of the inmate. All staff said they would separate the victim from other inmates and keep him safe. If the scene was determined, they would notify the Shift Commander so other staff could be sent to protect it.</p> <p>The facility reported twenty-five investigations of sexual abuse during the review period on the PAQ. Three of the allegations were made to security staff that separated the inmate victim from the perpetrator. Three allegations of sexual abuse were made in a time frame that allowed for the collection of physical evidence. Security staff first responders protected evidence on the victim in all three incidents.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review –The 2024 Crossroads Correctional Center Coordinated Response to Offender Sexual Abuse was provided for review. The document is CRCC's institutional plan to coordinate staff actions in response to an incident of sexual abuse. The plan provides basic roles to staff first responders, medical and mental health staff, the Shift Commander, PREA Site Coordinator, victim advocate staff, and the Chief Administrative Officer or designee. The plan also covers staff response to allegations of penetration and non-penetration incidents of sexual abuse.</p> <p>Warden Interview – The Warden said the facility has a coordinated response plan for allegations of sexual assault and sexual abuse. The plan is specific to Crossroads Correctional Facility and informs staff of their responsibilities in response to allegations of sexual abuse.</p> <p>The facility meets this standard based on information from the interview and plan reviewed.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>a-b) MDOC policy D2-11.6 Labor Organization states “Per the Prison Rape Elimination Act, the department shall not enter into or renew any collective bargaining agreements or other agreements that limit the department’s ability to remove alleged staff sexual abusers from contact with any offender or resident pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.”</p> <p>Agency Head Interview – The designee for the MODOC Director said the Missouri DOC does have an active bargaining unit agreement, but it does not limit the agency’s ability to remove staff alleged to have committed sexual abuse away from inmates during the investigation the same as other staff.</p> <p>PREA Coordinator Interview – The PREA Coordinator said the Missouri DOC has a collective bargaining agreement for staff, but it does not prevent the removal of staff from contact with an offender that alleged sexual abuse by the staff. He said the agreement may have expired and has not been renewed.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA site coordinator shall ensure victims, individuals who report sexual abuse, and those that cooperate with offender sexual abuse investigations are monitored and protected from retaliation.”</p> <p>Documentation of retaliation monitoring that was conducted by CRCC staff for ten allegations of sexual abuse. Three allegations of sexual abuse were made by inmates at other MODOC facilities for incidents that occurred at CRCC. CRCC staff did not monitor retaliation in those cases.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires the PREA Site Coordinator to offer emotional support services to offender victims, witnesses, reporters, staff reporters and staff witnesses.</p> <p>Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.</p> <p>Warden Interview – The Warden said she has staff designated to monitor for retaliation. If retaliation is suspected, the person retaliating will be separated from the inmate victim. An inmate that is determined to be retaliating may be moved away from the inmate victim or transferred to another facility. Staff suspected of retaliation can be reassigned away from the inmate or put on temporary suspension. If it is determined staff are retaliating progressive discipline will be used up to</p>

termination.

Retaliation Monitoring Staff – The staff that conduct retaliation monitoring said she is assigned monitoring when the monitoring form is emailed to her. She said she has an initial meeting with the inmate victim. She informs the inmate she will meet with them every 30 days and they can contact her between meetings if they have concerns about retaliation.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The alleged victim of offender sexual abuse shall be monitored for a minimum of 90 days to assess any potential risk or act of retaliation. The assessment-retaliation status checklist form shall be used during each of the assessment interviews. If the victim expresses fear of retaliation, monitoring shall continue for an additional 90 day period or until the victim or reporter is no longer in fear of retaliation or if the investigation is unfounded.”

Documentation Review – Retaliation monitoring was conducted and documented in ten of the thirteen sexual abuse investigations reviewed. Three sexual abuse investigations were reported when the inmate was at another facility. Retaliation monitoring was documented in ten of the thirteen sexual abuse investigations for up to 90 days. The Assessment/Retaliation Status Checklist form was used to document the factors that were monitored and if the inmate reported any concerns. It appeared that the staff was monitoring changes in housing, work, program assignments and new conduct violations.

Retaliation Monitoring Staff Interview – The staff that monitors retaliation said she conducts monitoring for 90 days. She reviews inmate conduct, program assignments, housing assignment changes, and work assignment changes. If she suspects retaliation, she immediately reports the retaliation to her supervisor, the PREA Site Coordinator and the facility investigator. She can continue monitoring beyond 90 days if needed due to individual circumstances.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Monitoring shall include face-to-face status checks.” A staff that conducts monitoring said she meets with the victim every 30 days.

Retaliation Monitoring Staff Interview - The staff that conducts monitoring said she meets with the victim every 30 days.

Documentation Review – Retaliation monitoring was conducted in ten sexual abuse investigations reviewed. In all sexual abuse investigations, retaliation monitoring was conducted with an initial meeting and periodic meetings every 30 days for up to 90 days. One monitoring ended prior to 90 days when the finding was unfounded.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Reporters and witnesses shall be monitored for retaliation at the minimum of one time utilizing the assessment-retaliation status checklist form. If no retaliation is reported, monitoring will cease.”

	<p>CORRECTIVE ACTION REQUIRED: Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims. Provide the policy change and documentation of the change in policy and practice being communicated to all PREA Site Coordinators.</p> <p>Corrective Action Completed: The Agency has updated policy D1-8.13 Offender Sexual Abuse and Harassment to now include third-party inmate reporters in face-to-face monitoring meetings for 90 days, aligning with the existing monitoring requirements for inmate victims. Staff who report sexual abuse will undergo 90 days of monitoring and receive a flyer detailing how to report any retaliation to the Warden, PREA Hotline, CLEAR line, PREA Email, or the Office of Professional Standards email. Offenders or staff who cooperate in a sexual abuse investigation as witnesses and express concerns about retaliation will be evaluated and protected from retaliation. This policy revision and its implementation were communicated to the PREA site Coordinators (PCM) by the PREA Unit Manager (PREA Coordinator) on August 23, 2024, via email.</p> <p>Based on the information from interview, policies and documents reviewed, the facility meets all provisions of the standard.</p>
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115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Following an allegation of offender sexual abuse or if an offender is assessed as being at high risk of victimization, the shift supervisor shall ensure the offender is housed in the least restrictive housing available to ensure safety. When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.” MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30-day review.</p> <p>The facility reported zero inmates were placed in administrative segregation involuntarily after reporting sexual abuse during the reporting period. There were no inmates in segregation involuntarily at the time of the onsite audit for reporting sexual abuse.</p>

	<p>Warden Interview – The Warden said inmates that report an incident of sexual abuse would remain in open population housing. If it is not safe for them to remain in open population, he could be placed in administrative segregation until a safe housing alternative can be found. A transfer would be pursued if there was no safe alternative at Crossroads CC.</p> <p>Staff that Supervise Segregation – A Unit Manager said he has not had an inmate involuntarily placed in segregation after reporting an incident of sexual abuse. He said the inmate confinement record documents the reason for placement in segregation as the only alternative and the restrictions to privileges, work and programs. A review is conducted in the first week and then on 30 days.</p> <p>The facility meets this standard based on the information from interviews and policies reviewed.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she is immediately contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Facility Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Facility Investigator – The Facility Investigator said she investigates only sexual harassment allegations. Any allegation that is unclear what type of incident it is, she will do an initial review to determine the type of incident. She said it takes one or two working days to initiate an investigation for a sexual harassment allegation.</p> <p>There were three anonymous and one third party report that led to investigations in the twenty investigations reviewed.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators shall receive specialized PREA investigation training prior to conducting an investigation involving offender sexual abuse.” The PREA Unit Investigators conduct all of the sexual abuse investigations.</p> <p>PREA Unit Investigator – The PREA Unit Investigator said she has completed the NIC Sexual Abuse Investigations in a Confinement Setting, the NIC Advanced Sexual Abuse Investigations training and training by VAWA online.</p>

Document Review – NIC training certificates were provided for 12 investigators in the PREA Unit that complete sexual abuse investigations.

c) PREA Unit Investigator Interview – The PREA Unit Investigator said she receives a Request for Investigation from the facility and the PREA Notification Checklist when there is a clear sexual abuse allegation. She said the PREA Unit Investigators conduct administrative and criminal investigations for sexual abuse. She reviews the initial information, reviews video evidence if available, conducts a background investigation of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident. The facility will assist by protecting the scene and the SANE staff collecting evidence through a forensic examination.

d) PREA Unit Investigator Interview – The PREA Unit Investigator said she does not conduct compelled interviews. If a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it certified mail to document the referral.

e) PREA Unit Investigator Interview – The PREA Unit Investigator said she is not allowed to subject the victim to a truth telling device. The subject of the investigation could be asked to complete a voice stress analysis. She determines the subject's credibility on a case-by-case basis from the background review of prior criminal history, PREA investigations and conduct.

Facility Investigator – The Facility Investigator said she would not use a truth telling device on the victim as a condition of continuing an investigation. She is not trained to use a Voice Stress Analysis and has not used one on a victim in a sexual harassment investigation.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Administrative investigations shall include an effort to determine whether staff member actions or failure to act contributed to the abuse."

PREA Unit Investigator – The PREA Unit Investigator said she reviews staff actions in relation to the coordinated response plan, policies and procedures. This is documented in the report.

Facility Investigator – The Facility Investigator said if she finds the staff failed to report or their actions contributed to an incident of sexual abuse, she will report that to PREA Unit Investigators for further investigation and action.

g-h) Investigation File Review – There was one criminal investigation conducted during the review period. All other investigations reviewed were administrative investigations. The investigations contained a thorough description of physical, testimonial, and documentary evidence. One case that was substantiated did document a criminal violation and contained a thorough. and contained a thorough description of testimonial and documentary evidence. There was no physical evidence in the case. The case was referred for prosecution resulting in a criminal conviction.

	<p>i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Inquiries regarding offender sexual abuse and harassment and all supporting documents shall be retained as long as the alleged perpetrator is incarcerated or employed with the department, plus 5 years and in accordance with the department procedure regarding records retention."</p> <p>j) PREA Unit Investigator – The investigator said when a staff that is the subject of an investigation leaves employment prior to interview, she will obtain contact information from human resources and call to request the staff come back to the facility for an interview or interview them on the phone. If they refuse to answer, she will make several attempts before moving on with the investigation.</p> <p>The facility meets this standard based on the information from interviews, policies and investigations reviewed.</p>
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Administrative investigations shall impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated."</p> <p>Facility Investigator Interview – The Facility Investigator said she uses the evidence standard of preponderance of evidence for administrative investigations she conducts for sexual harassment. She said that means it is more likely than not that the allegation happened as reported.</p> <p>PREA Unit Investigator Interview - The PREA Unit Investigator said she uses the preponderance of evidence standard for the administrative investigations of sexual abuse. More than 50% of the evidence supports substantiated.</p> <p>Investigation Review – Twenty administrative investigations were reviewed. There were three substantiated investigations that were found to be based on a preponderance of evidence standard.</p> <p>The facility meets this standard based on the information from interviews, policies and investigations reviewed.</p>

115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p>

Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Upon the completion of an offender sexual abuse investigation, the department's PREA unit shall make written notification to the alleged victim regarding the outcome of the investigation utilizing the applicable PREA alleged sexual abuse by offender notification form or the PREA alleged sexual abuse by staff member notification form."

Warden Interview – The Warden said a written notice of investigation outcome is provided to inmates for sexual abuse investigations for all outcomes. The PREA Unit sends the notice for the PREA Site Coordinator to give to the inmate.

PREA Unit Investigator Interview – the PREA Unit Investigator said she provides the written notification to the facility PREA Site Coordinator (PCM). The PREA Site Coordinator provides the written notification to the inmate. There is a form for sexual abuse by an offender and a form for sexual abuse by staff.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All subsequent notifications shall be made when: Staff member on offender allegations: following the completion of the investigation, the offender shall be notified when the following occurs (unless the investigation is unfounded); The staff member perpetrator is no longer assigned to the housing unit; The staff member perpetrator is no longer employed by the department; The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution; A disposition of charges exists related to sexual abuse within the institution."

Investigation File Review – The facility provided a list of the investigations completed in the last 12 months. There were four sexual abuse investigations involving staff. All inmate victims were provided a PREA Alleged Sexual Abuse by Staff Member Notification form. Three were unfounded and one was substantiated. In the substantiated case, the inmate victim was notified that the staff were no longer employed at the facility.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offender on offender allegations: following the completion of an investigation, the offender shall be notified when the following occurs: (1) The offender has been indicted on a charge related to sexual abuse within the institution. (2) A disposition of charges exists related to sexual abuse within the institution."

Investigation File Review – The facility reported twenty sexual abuse investigations that involved inmate perpetrators that concluded in the last 12 months. Nine were selected for review. A PREA Alleged Sexual Abuse by Offender Notification form was provided to the inmate victim in all nine investigations. Seven were unsubstantiated and two were unfounded.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The PREA unit shall forward the written notification to the offender via the PREA site coordinator. The PREA site coordinator shall ensure that the written notification is

	<p>provided to the offender in a confidential manner.”</p> <p>Document Review – There were thirteen investigations of sexual abuse that concluded during the review period. The inmate victim was notified of the investigation outcome in all thirteen sexual abuse investigations that concluded during the review period.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures.” The policy follows this provision.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Termination from the department shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse.” The policy follows this provision.</p> <p>Investigation File Review – Twenty investigations were reviewed. There were two substantiated investigations involving staff during the review period. One staff was prosecuted for criminal violation for substantiated sexual misconduct with an inmate. There was one finding of substantiated staff sexual harassment. There was no documentation in the investigation case file of the staff receiving discipline. A request was sent to the PREA Site Coordinator to determine if there was any discipline. The substantiated sexual harassment has not been addressed with the staff as of this interim report. The facility will review the circumstances of the incident with personnel for possible disciplinary action. The facility must provide documentation of what actions are taken to meet this standard.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All terminations for violations or the resignation of a staff member, who would have been terminated if not for their resignation, shall be reported to relevant licensing or accreditation bodies and law enforcement.” The policy follows this provision.</p> <p>The investigation of sexual abuse that was substantiated was referred to the prosecutor. The staff was prosecuted but resigned prior to the investigation conclusion. They did not hold a professional license that had to be reported to a licensing board.</p>

	<p>CORRECTIVE ACTION REQUIRED: There was no documentation in the investigation case file of the staff receiving discipline for a substantiated staff sexual harassment case. A request was sent to the PREA Site Coordinator to determine if there was any discipline. The substantiated sexual harassment has not been addressed with the staff as of this interim report. The facility will review the circumstances of the incident with personnel for possible disciplinary action. The facility must provide documentation of what actions are taken to meet this standard.</p> <p>Corrective Action Completed: The facility HR staff reviewed the incident with the staff and issued a letter of reprimand. The letter was provided to this auditor for review.</p> <p>Based on the information from documents and policies reviewed, the facility meets all provisions of the standard.</p>
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115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies and law enforcement." The policy reflects the provisions of the standard.</p> <p>Warden Interview – The Warden said if a contract staff or volunteer had an allegation of sexual abuse, they would be removed from the facility until the investigation is resolved. If the investigation is substantiated, there would be a permanent restriction on entry for that contractor. A substantiated sexual harassment would be reviewed on a case-by-case basis to determine if removal is appropriate.</p> <p>Document Review – There were no contract staff or volunteers found to be involved in an investigation of sexual abuse or sexual harassment from the investigation file review. The facility reported on the PAQ no contract staff or volunteers being reported to law enforcement or relevant licensing bodies during the review period.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>

115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be subject to corrective actions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender-on-offender sexual abuse in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Investigation File Review - The facility reported twenty inmate sexual abuse allegations during the review period. Nine inmate-on-inmate sexual abuse investigations reviewed. There were no substantiated cases of inmate-on-inmate sexual abuse. No inmates were disciplined for committing sexual abuse during the review period.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Warden Interview - The Warden said the inmate disciplinary process requires sanctions to be based on the circumstances of the violation, discipline history and progressive. Mitigating factors such as mental health can be considered.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The corrective action process shall consider whether an offender's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, shall be imposed in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Warden Interview - The Warden said when considering sanctions for inmate discipline, an inmate's cognitive disabilities and mental health can be used as mitigating factors in sanctioning for sexual abuse and sexual harassment conduct violations.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "If found guilty of sexual abuse, the PREA site coordinator or designee shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."

Mental Health Staff Interview - Inmate perpetrators will be offered mental health counseling within 60 days of the investigation being substantiated. Counseling is not mandated as a condition of program participation.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact."

	<p>Document Review – the facility provided three conduct violations for inmates exposing their genitals to staff. The staff did not consent to the behavior.</p> <p>f) Missouri DOC policy IS19-1.6 Offender Accountability Program states “a report of sexual misconduct, made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying.” The policy reflects this provision of the standard.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department prohibits all sexual activity between offenders. Consensual sexual activity between offenders shall not be deemed sexual abuse and shall be addressed in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has experienced prior sexual victimization, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening.”</p> <p>Risk Screening Staff Interview – The two staff that conduct risk screening that were interviewed said they offer mental health services to inmates that report being a prior victim of sexual abuse. If the inmate wants to see mental health staff for services, they will complete a referral form and email it to mental health staff.</p> <p>Mental Health Staff Interview – Mental Health staff said she receives referrals for mental health services for inmates that report being prior victims of sexual abuse at the risk assessment.</p> <p>Inmate Interviews – Five inmates that were interviewed reported being a prior victim of sexual abuse. Two inmates said they declined the offer for mental health services. One inmate said he accepted the offer and was seen by mental health. Two that reported being a prior victim at the interview did not tell staff they were a prior victim of sexual abuse at the risk assessment, therefore they were not offered mental health services.</p> <p>Document Review – Five inmates reported being a prior victim of sexual abuse during interviews. The facility only identified one inmate reporting prior victimization during</p>

	<p>the risk assessment. Three reported being a prior victim on the risk assessment and were offered mental health services. One inmate declined and two accepted mental health services. This was documented on the risk screening. Two that reported being a prior victim at the interview did not tell staff they were a prior victim of sexual abuse at the risk assessment, therefore they were not offered mental health services.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has previously perpetrated sexual abuse, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a mental health practitioner within 14 calendar days of the intake screening.”</p> <p>d) Risk Screening Staff Interview - Staff that conduct the risk assessment said the information they gather from inmate interviews and the inmate record to complete the risk assessment is confidential and strictly limited to staff involved in the risk assessment process and review. The risk assessment is completed in an electronic system called MOSIS that staff must be granted access to.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting.”</p> <p>Medical Staff Interview – Medical staff said they cannot share information reported by an inmate about prior sexual abuse that occurred in the community with facility investigators without a signed informed consent from the inmate.</p> <p>Mental Health Staff Interview – The Mental Health staff said inmates are informed of mental health staff duty to report in writing prior to a therapy meeting. If an inmate provides information about an incident of sexual abuse at an institution to mental health staff, the staff must report it to the facility investigator. She said the inmate would have to sign a release for a report of sexual abuse that occurred in the community.</p> <p>The facility meets the provisions of this standard based on interviews, documents and policies reviewed.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional</p>

judgment.”

Medical Staff Interview – Medical staff interviewed said inmates that victims of sexual abuse would be assessed and treated for emergent injuries and instructed not to destroy evidence until a forensic examination can be conducted. The forensic exam can be conducted by the SANE staff from another MODOC facility. SANE trained medical staff are on call. If no MODOC SANE’s are available, the inmate can be taken to a local hospital with a forensic exam department.

Inmate Interview – An inmate that reported sexual abuse said medical treatment and a SANE was provided by medical staff at the facility immediately after reporting. The inmate was also seen by mental health staff a few days after the report was made for services.

Document Review – Medical records for two inmates that reported sexual abuse documented an immediate evaluation and treatment by medical staff. Both were provided a SANE at the facility by qualified SANE medical staff.

b) Staff Interviews – All staff said they would protect the victim until the shift supervisor could arrange for additional staff to take the victim to medical or they were instructed to take the victim to medical. The Shift Commander would notify medical about the sexual abuse report. If medical staff were temporarily unavailable, custody staff would wait with the inmate victim until they could be seen by medical.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”

Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections by the MODOC SANE staff or by the hospital SANE.

Inmate Interview – An inmate that reported sexual abuse reported being offered and given STI testing and treatment.

Document Review – Medical records for two inmates that reported sexual abuse documented STI testing and treatment was provided by medical staff at CRCC.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”

The facility meets the standard based on the information from interviews, policies and documents reviewed.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 311 544 342">Auditor Discussion</p> <p data-bbox="256 387 1477 589">a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each victim and abuser shall be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals shall be completed for continued care following their transfer to, or placement in, other facilities or their release from custody.”</p> <p data-bbox="256 627 1445 701">Medical Staff Interview – Medical staff said inmate victims of sexual abuse would be provided follow up treatment on injuries and medication management for STI care.</p> <p data-bbox="256 739 1469 813">Mental Health Staff Interview – Mental health staff said victims of sexual abuse would be offered treatment services based on trauma informed care.</p> <p data-bbox="256 851 1422 969">Inmate Interview – An inmate that reported sexual abuse reported receiving medication follow up for STI treatment and prevention as well as follow up mental health services.</p> <p data-bbox="256 1008 1437 1126">c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims and abusers shall be provided with medical and mental health services consistent with the community level of care.”</p> <p data-bbox="256 1164 1453 1238">Mental Health Staff Interview – Mental health staff said the victim would be provided mental health services similar to services offered in the community.</p> <p data-bbox="256 1276 1414 1350">Medical Staff Interview – The medical staff said the medical services provided are consistent to the services offered in the community.</p> <p data-bbox="256 1388 1477 1590">f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p data-bbox="256 1628 1461 1785">Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections. If the inmate goes to a local hospital, the SANE there would conduct the testing and ACC medical staff would follow up on the medication.</p> <p data-bbox="256 1823 1437 1986">g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p data-bbox="256 2024 1437 2056">h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states</p>

	<p>"Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."</p> <p>Mental Health Staff Interview – Mental health staff said therapies that focus on what pushes them to abusive behavior would be provided to the inmate perpetrators.</p> <p>The facility meets the provisions of this standard based on information from interviews and policies reviewed.</p>
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115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded." The policy reflects this provision of the standard.</p> <p>Document Review – The facility provided seven completed administrative investigations for review from the audit review period. There were eight investigations of sexual abuse with three substantiated, six unsubstantiated and three unfounded. Incident reviews were documented on a PREA Sexual Abuse Incident Debriefing form for all substantiated and unsubstantiated investigations. The three unfounded were not reviewed.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded." The policy reflects this provision of the standard.</p> <p>Document Review – The PREA Coordinator provided a list of investigations during the last 12 months for CRCC. There were eleven completed sexual abuse investigations that required a sexual abuse incident review to be completed. Ten completed PREA Sexual Abuse Incident Debriefing forms were provided for review. The PREA Sexual Abuse Incident Debriefing forms document the incident review for unsubstantiated and substantiated sexual abuse investigations. All ten sexual abuse incident reviews were completed ordinarily within 30 days of the investigation conclusion. A completed investigation of two reports of sexual abuse concluded with one incident being unfounded and the other incident being unsubstantiated. An incident review</p>

would be required for the unsubstantiated incident but was not completed based on the unfounded finding for the first incident. An Incident Debriefing must be completed for the unsubstantiated finding.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The review team for offender sexual abuse events shall include the PREA site coordinator, and other upper level administrators, when applicable, with input from the shift supervisor, investigators, and medical or mental health practitioners." The policy reflects this provision of the standard.

Warden Interview - The Warden said the incident debriefing team consisted of the Deputy Warden (PCM), Major, Investigator, medical staff, mental health staff, and shift supervisor.

Document Review -The ten PREA Sexual Abuse Incident Debriefing forms documented the members of the review team. The Deputy Warden, Health Services Administrator, Mental Health Director, Major, shift supervisor (captain or lieutenant) and Investigator participated in all reviews.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The PREA sexual abuse incident debriefing report shall be completed by the PREA site coordinator outlining in detail the findings of the incident debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse incident debriefing form." The form requires the review team to answer questions for the five factors in this standard.

Warden Interview - The Warden said the debriefing team looks at the response of staff to the report; barriers or blind spots where the incident occurred; factors that may have contributed to the incident, such as sexual orientation or gender identity of the victim, the victim's charges, gang affiliation of an inmate subject, or race; staffing levels; and video camera deployment.

PREA Compliance Manager and Incident Review - An Assistant Warden is designated as the PREA Site Coordinator or PCM for Crossroads CC. He schedules the reviews as needed. The team can consist of the DW, Major, medical staff, mental health staff, Investigator, shift supervisor or first responder involved with the incident. He documents the review on the form and provides a copy to the Warden and PREA Coordinator. All evidence is reviewed including written statements by the victim, witnesses, investigator interview notes, and watching video if available. If corrective actions are identified, they are documented on the form and coordinated with the Warden for completion or documented why it cannot be completed.

Document Review -The ten PREA Sexual Abuse Incident Debriefing forms documented a review of physical barriers, possible motivating factors, staffing levels, monitoring technology, and policy or practice change.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The facility shall implement the recommendations for improvement or shall document its reasons why recommendations shall not be implemented." The policy

	<p>reflects this provision of the standard.</p> <p>CORRECTIVE ACTION REQUIRED: A sexual abuse incident review (Debriefing) must be completed for the investigation that covered two reports of sexual abuse with one having a finding of unsubstantiated. Once the debriefing is completed, it must be provided for review.</p> <p>Corrective Action Completed: The facility incident review team conducted a review of the substantiated allegation for an investigation involving two allegations of sexual abuse. The review was documented on the PREA Sexual Abuse Debriefing form and signed by the Facility Investigator, DW/PREA Site Coordinator, Shift Supervisor, Unit Manager, and medical staff. The PREA Sexual Abuse Incident Debriefing form documented a review of physical barriers, possible motivating factors, staffing levels, monitoring technology, and policy or practice change.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets all provisions of the standard.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Annual Site Report: Each facility shall utilize information from the offender sexual abuse incident debriefings to prepare an annual report to be submitted to the department's PREA manager by the last working day in March." The policy provides the definitions for sexual abuse and sexual harassment in section II. The definitions are equal to the definitions in the PREA standards. The agency requires the facilities to track PREA incidents and provide a summary of the data in an annual PREA report.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Agency Report: The PREA manager shall prepare an annual report compiling each facility's current year's data and corrective actions."</p> <p>c) Missouri DOC Annual PREA Report – The 2022 and 2021 MODOC PREA Annual Reports were reviewed. The reports provided a table of data broken down by incident type and outcomes. This data can be used to complete the Survey of Sexual Victimization summary report.</p> <p>Document Review – The Missouri DOC Survey of Sexual Victimization was completed for 2022.</p> <p>d) PREA Coordinator Interview – The PREA Coordinator said all information and data from incidents of sexual abuse and sexual harassment are retained in the Investigative Reporting Intelligence System.</p>

	<p>f) PREA Coordinator Interview – The PREA Coordinator said he uses the data and incident information for substantiated investigations from the Investigative Reporting Intelligence System to complete the Survey of Sexual Victimization when it is requested.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions. a. The report shall include: (1) a comparison with prior year's data, (2) corrective actions, and (3) an assessment of the department's progress in addressing offender sexual abuse.”</p> <p>2021 & 2022 PREA Annual Report – The PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>Agency Head – The Division Director said incident data is used to assess and improve housing assignments, video monitoring and staffing levels. Additional training is provided to staff through PREA Unit staff speaking at basic training courses.</p> <p>PREA Coordinator – The PREA Coordinator said the annual report compares data since 2013 and summarizes ongoing corrective action.</p> <p>PREA Compliance Manager Interview – The PREA Site Coordinator/DW said the facility provides the facility data on its annual PREA report that the agency uses to complete the agency PREA report.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department's annual PREA report shall be made available to the public on the department's internet website.”</p> <p>Agency Head – The Division Director said the Director approves the report prior to posting it on the department’s website.</p> <p>Document Review – The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. Though the Agency Head Designee said the reports are reviewed and approved by the Director, the reports are not signed by the Director either electronically or by signature. It is recommended that the annual report be signed by the Director or designee each year.</p>

	<p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The CAO or designee, PREA manager or department director shall edit specific material from the reports when publication would present clear and specific threat to the safety and security of a facility. The CAO or designee, PREA manager, or department director shall indicate the nature of the material edited.”</p> <p>PREA Coordinator – The PREA Coordinator said personally identifying or confidential information about incidents are not included in annual reports.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>
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115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>PREA Coordinator – The PREA Coordinator said the PREA incident information is securely stored in the Investigative Reporting Intelligence System (IRIS). Access to IRIS is limited to investigators, PREA Site Coordinators, Warden’s and other staff directly involved in incident investigation and review.</p> <p>Missouri DOC Annual PREA Report - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The last two years of PREA Annual Reports were reviewed and found to have a comparison of sexual abuse data from 2013 to 2022. The reports did not contain any personal identifiers.</p> <p>The facility and agency meet this standard based on the information from the PREA Coordinator interview and review of annual reports found on the MODOC PREA webpage.</p>

115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. Crossroads Correctional Center was audited three years ago. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all their facilities during all audit cycles.</p>

	<p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with inmates in a private room with a window for observation by staff.</p> <p>A notice of audit was posted throughout the facility six weeks prior to the onsite audit notifying inmates they could send confidential correspondence to this auditor. No letters were received prior to the onsite audit from inmates.</p>
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115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. Crossroads Correctional Center was audited in 2015, then it closed temporarily in 2019. The inmates were moved to Western Missouri Correctional Center next door. WMCC was audited in 2020. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all their facilities during all audit cycles.</p> <p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with inmates in a private room with a window for observation by staff.</p> <p>A notice of audit was posted throughout the facility six weeks prior to the onsite audit notifying inmates they could send confidential correspondence to this auditor. No letters were received prior to the onsite audit from inmates.</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	na
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a) Use of screening information		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b) Use of screening information		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c) Use of screening information		
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)	
	<div data-bbox="320 185 1273 555"> <p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div>

PREA Facility Audit Report: Final

Name of Facility: Fulton Reception and Diagnostic Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 05/24/2024

Date Final Report Submitted: 10/09/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 10/09/2024

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	03/18/2024
End Date of On-Site Audit:	03/20/2024

FACILITY INFORMATION	
Facility name:	Fulton Reception and Diagnostic Center
Facility physical address:	1393 Route O, Fulton , Missouri - 65251
Facility mailing address:	

Primary Contact

Name:	
Email Address:	
Telephone Number:	

Warden/Jail Administrator/Sheriff/Director	
Name:	Scott Weber
Email Address:	scott.weber@doc.mo.gov
Telephone Number:	5735924040

Facility PREA Compliance Manager	
Name:	Shawn Twyman
Email Address:	shawn.twyman@doc.mo.gov
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Ashley Skaggs
Email Address:	ashley.skaggs@doc.mo.gov
Telephone Number:	573-760-9977

Facility Characteristics	
Designed facility capacity:	1302
Current population of facility:	1158
Average daily population for the past 12 months:	1130
Has the facility been over capacity at any point in the past 12 months?	Yes
Which population(s) does the facility hold?	Males

Age range of population:	18+
Facility security levels/inmate custody levels:	C-1, Minimum, C-2 Medium, C-5 Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	348
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	2
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	49

AGENCY INFORMATION

Name of agency:	Missouri Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2729 Plaza Drive, Jefferson City, Missouri - 65109
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102
Telephone number:	5737512389

Agency Chief Executive Officer Information:

Name:	Trevor Foley
Email Address:	Trevor.Foley@doc.mo.gov
Telephone Number:	573-526-6607

Agency-Wide PREA Coordinator Information

Name:	Darren Snellen	Email Address:	darren.snellen@doc.mo.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-03-18
2. End date of the onsite portion of the audit:	2024-03-20

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1302
15. Average daily population for the past 12 months:	1130
16. Number of inmate/resident/detainee housing units:	10
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1197
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	2
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	21
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	2
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	117

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	4
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	13
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	497
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	338
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	49

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	3
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	23
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<div> <input type="checkbox"/> Age </div> <div> <input type="checkbox"/> Race </div> <div> <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The total population was divided by the number of required random inmate interviews. This number was used to select inmates at that numerical interval on the inmate list by housing unit. (i.e. every 40th)

56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	18
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	3

62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The PCM asked the Case Manager if there were any blind inmates in the population during the onsite audit. The Case Manager reported none at the time of the audit.
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	2
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The PCM asked the Case Manager if there were any LEP inmates in the population during the onsite audit. The Case Manager reported none at the time of the audit.
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	1
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	6
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported no inmates being involuntarily placed in segregation for risk of victimization. None of the inmates interviewed in segregation reported being place in segregation involuntarily after reporting sexual abuse.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No

74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	19
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☒ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☒ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☒ First responders, both security and non-security staff
- ☒ Intake staff

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	4
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?

☒ Yes

☐ No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes

☐ No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

☒ Yes

☐ No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

88. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="checked" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY	
Sexual Abuse and Sexual Harassment Allegations and Investigations Overview	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	7	0	7	0
Staff-on-inmate sexual abuse	6	0	6	0
Total	13	0	13	0

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	3	0	3	0
Staff-on-inmate sexual harassment	2	0	2	0
Total	5	0	5	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	4	0	2	1
Staff-on-inmate sexual abuse	1	0	1	3
Total	5	0	3	4

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	2	0
Staff-on-inmate sexual harassment	0	1	2	0
Total	0	2	4	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

6

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	4
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	5
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

2

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☐ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment is the policy that provides the zero-tolerance policy, definitions of sexual abuse and sexual harassment, and the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>b) Based on the organization charts provided, the Missouri Department of Corrections has a PREA Coordinator in the Office of Professional Standards who reports to the Director of that division. The Director of OPS then reports to the MODOC Director.</p> <p>PREA Coordinator Interview – The PREA Coordinator said he has sufficient time and authority to fulfill the duties of the PREA Coordinator for the agency. He oversees the PREA Unit which consists of dedicated investigators and support staff that assist him in managing and monitoring PREA standards compliance and PREA investigation at all facilities in the agency. Each facility has a PREA Compliance Manager who reports to him for PREA Compliance matters.</p>

	<p>c)</p> <p>PCM Interview – The Deputy Warden said he has the time and authority to complete the requirements of being the PREA Compliance Manager for FRDC. He is responsible for monitoring PREA compliance in addition to his other duties as the Deputy Warden of Offender Management.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>It was reported on the PAQ that the Missouri Department of Corrections currently does not contract for the confinement of inmates with a private or other governmental agency. The PREA Coordinator stated in his interview the Missouri DOC is not contracting with anyone for confinement of inmates at this time. A memorandum was provided by the PCM that states the Ozark Correctional Center does not contract for the confinement of inmates.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires each facility to “maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse.” “The staffing plan shall consider the facility’s physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.”</p> <p>Tour Observations - During the facility tour, this auditor observed staff monitoring all areas of the facility where inmates were present. Video monitoring was found throughout the facility covering areas where staff are not constantly present. Staff were observed conducting rounds and monitoring inmates in the housing units, education, foodservice, warehouse, medical and program areas. An inmate bathroom was observed in the warehouse that had a lock inside allowing the inmate to lock out staff or lock in another inmate. A staff bathroom next to the inmate bathroom was also observed open with a lock on the inside and no key lock on the outside. Both</p>

could be opened with a special tool that would have to be found in an emergency.

CORRECTIVE ACTION REQUIRED: The lock on the inmate bathroom must be removed or a key lock installed to keep the door locked so staff can control access to the bathroom. The staff bathroom must have a key lock installed on the outside and remain shut to prevent inmates from getting in.

Corrective Action Completed: Locks were removed from the bathrooms identified as being a potential blind spot. Photos of the doors with locks removed were provided to show completion. The area has a staff office with windows in view as well as cameras monitoring the doors.

Document Review – A document called PREA Staffing Plan 2023 Audit was provided by the facility for review. The document did not contain a documented staffing plan that described the deployment of security staff on posts or the positions of non-security staff for the facility based on the factors the standard requires to be considered. It mentioned the number of staffing allotted per shift and the number of vacancies.

CORRECTIVE ACTION REQUIRED: a staffing plan was not provided. The staffing plan should be a document that clearly identifies the intended deployment of staff by describing relieved posts and positions, the types of employees to be assigned, the location of the post/position in the facility, and the purpose of the post/position.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall comply with the staffing plan on a regular basis, deviations from the staffing plan shall be documented and justification for deviations noted.” The facility reported no deviations from the staffing plan on the PAQ.

Warden Interview – The Warden said a deviation from the staffing plan would be closing a mandatory post. Any deviation would be documented on the shift summary report. He said he reviews the shift reports and has not seen deviations from the staffing plan in the last year.

c) **Document Review** – A document called Security Camera and Staffing Plan PREA Review Meeting was provided by the facility for review. The document describes a meeting that was held on March 8, 2024 with the Warden, Deputy Wardens of Offender Management and Operations, Assistant, and other executive staff. Camera placement was reviewed and areas where more cameras were needed were documented. A review of the staffing plan mentioned having 69 vacancies and how the current staff are placed on each shift. There was no review of adjustments needed to a documented staffing plan.

CORRECTIVE ACTION REQUIRED: A documented staffing plan must be reviewed to determine if there are any needed adjustments based on the resources the facility has available to adhere to the staffing plan.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each institution shall ensure the classifications of lieutenant or above conduct and

	<p>document unscheduled and unannounced rounds to identify and deter offender sexual abuse and sexual harassment. Each facility shall ensure that rounds occur periodically in all areas of the facility. Staff members shall be prohibited from alerting other staff members that these rounds are occurring. The rounds shall be documented and readily accessible during audits as outlined in the facility's standard operating procedure." The policy reflects the requirements for this provision of the standard.</p> <p>Document Review – Shift Summary Reports were reviewed for unannounced rounds being documented on randomly selected dates for all shifts. The Shift Summary Report documents unannounced rounds and the locations of the rounds conducted by Lieutenants and captains on every shift.</p> <p>Random Staff Interviews – All staff interviewed said they see shift supervisors and assistant shift supervisors making rounds several times per week.</p> <p>Inmate Interviews – Inmates were asked if they see supervisors making rounds. Most said they see sergeants daily. Most inmates said they see captains and lieutenants in the housing unit several times per week.</p> <p>The facility does not meet three of the provisions of the standard. Corrections must be completed and documentation of the correction provided for review.</p> <p>Corrective Action Completed: A staffing plan was documented in CO I Staffing Dashboard Report, and an Institutional Staff Roster and provided with a review. The review of the staffing plan was completed and documented in a Facility Staffing Plan Review document that was completed by the PREA Site Coordinator (PCM) and sent to the PREA Unit Manager (PREA Coordinator) for MODOC for review. The review covered thirteen factors that are required in substandard (a) and (c). The review was signed by the Major, PREA Site Coordinator and Warden. The facility meets the provisions of this standard based on the policies, documents, interviews and corrections completed.</p>
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115.14 Youthful inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "A youthful offender will not be placed in a housing unit in which he will have sight, sound, or physical contact with any adult offender through use of a shared day room or other common space, shower area, or sleeping quarters in accordance with the institutional services procedure regarding offender housing assignments."</p> <p>The facility indicated on the PAQ the youthful inmate standard is not applicable to Fulton RDC. The PREA Site Coordinator said that Fulton RDC does not house inmates</p>

	<p>under 18. If an inmate under 18 years of age arrives at FRDC, they are processed in the intake area after all adult inmates are removed from the area. The youthful inmate will not be placed in housing and transferred to the facility designated for youthful inmates that same day. During inmate interviews, this auditor spoke to an inmate that said he was under 18 when he arrived at the facility and was placed in segregated housing until he turned 18 a few days later. The inmate also said he could hear adult inmates housed next to him in the administrative segregation unit. The records for this inmate were reviewed and verified he was under 18 at arrival and turned 18. According to the PREA Coordinator, all male inmates under 18 are to be housed at Farmington Correctional Center after a quick diagnostic is completed at the diagnostic facility.</p> <p>CORRECTIVE ACTION REQUIRED: The MODOC policy was not followed for placement of inmates under 18 in a designated housing unit at Farmington Correctional Center. FRDC must be instructed to transfer any inmate that arrives at FRDC under 18 years of age to the designated facility regardless of when the inmate turns 18 or house the inmate in an isolated housing unit that is sight and sound separated from adult inmates.</p> <p>Corrective Action Completed: The Director of Adult Institutions sent a letter to the FRDC Warden reminding him of the policy requirement for all youthful inmates received at FRDC from the county jails to be immediately transported to Farmington Correctional Center. As a result, youthful inmates are not placed in a housing unit at FRDC. The PREA Coordinator said they are received from the Sheriff transport at the intake area and then transferred to Farmington the same day. This process does not house the youthful inmate at FRDC.</p>
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115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri Department of Corrections policy IS20-1.3 Searches prohibits cross gender strip searches except in exigent circumstances. Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment also prohibits cross-gender strip searches except in exigent circumstances. The facility reported on the PAQ that no cross-gender strip searches occurred in in the past 12 months. The policies reflect the requirements of the provision of this standard.</p> <p>The facility reported on the PAQ there were no cross-gender strip or cross gender visual body cavity search during the review period. If there were a cross-gender strip search under exigent circumstances, it would be documented on a form 931-4701 per policy.</p> <p>c) Missouri DOC policy IS20-1.3 Searches requires staff to document all cross-gender strip searches on the cross-gender search form. There were no cross-gender</p>

strip search forms presented for review. The policy reflects the requirements for this provision of the standard.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with, institutional services, and probation and parole procedures regarding searches." The policy also requires staff of the opposite gender to announce their presence prior to entering a housing unit. These announcements are to be logged in the housing unit chronological log. Post orders for each housing unit were provided for review. The post orders required a mandated PREA announcement to be made and documented in the housing unit log when opposite gender staff begins work in a housing unit or enters when there are no opposite gender staff in the unit. The policy and post orders reflect the requirements for this provision of the standard.

Tour Observations –Opposite gender staff announcements were observed during the tour. Opposite gender staff announcements were documented in housing unit logs as PREA Announcements. Signs indicating female staff are on the unit are hung up for hearing impaired inmates. Showers in the housing units were single stalls covered with a shower curtain that prevented viewing of the inmate's genitals and buttocks but did not create a blind spot for staff. The showers were similar in all housing units. The showers in the segregation unit had a door with solid metal in the middle and expanded metal on the rest of the door for ventilation. The solid metal prevented the viewing of the inmate's genitals or buttocks while in the shower. Toilets were in the cells. Housing Unit 9 and 10 were open dormitory and had shower stalls with cinder block pony walls that provided modesty screens. The toilets and sinks were in another room with a partition next to the toilets and a partition at the entrance that together blocked the view of inmates on the toilets in the back of the room. There were no inmate bathrooms outside of the housing units that presented cross gender viewing issues.

Random Staff Interviews – Twelve staff were selected at random from shift rosters for interviews from all three shifts. All staff said they felt like the inmates could shower and use toilet facilities with enough privacy that staff could not see their genitals or buttocks. Some said they may see an inmate on the toilet in their cell briefly but it is incidental to cell checks during security rounds. All staff were aware of the requirement for opposite gender staff to make announcements when entering housing units. Male staff said they hear the announcements or make them on the speaker system when a female staff enters the housing unit.

Inmate Interviews – Most inmates said they hear the announcements for female staff entering the unit. Some said the announcement on the PA system can be inaudible, but they see the signs and know it is for female staff being present. Inmates said they can use the showers without being see by female staff in all of the housing units. Most inmates said they can use toilets in the cells without being seen if they shut the door. Some said if female staff look in the window of the cell when the door is closed,

	<p>they could see them using the toilet. This would be brief and incidental viewing during security cell checks.</p> <p>Document Review – Housing unit logs were requested for random dates in November and December 2023, January and February 2024. PREA announcements were found when female staff entered housing units or took over a shift in a housing unit.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not perform strip or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, diagnostic center reception and orientation, and receiving screening intake center.” Missouri DOC policy IS20-1.3 Searches prohibits staff from performing a strip search for the sole purpose of determining an inmate’s gender. The policies reflect the requirements of the provision of this standard. There were</p> <p>Random Staff Interviews – All staff said strip searching a transgender inmate solely for determining their genital status was prohibited by policy, not allowed and would be unprofessional. All strip searches would be for security reasons.</p> <p>Inmate Interview – Four inmates that identifies as transgender said they had not been strip searched only to determine genital status since being at the facility.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Custody staff members shall be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs.” The policy reflects the requirements for this provision of the standard.</p> <p>Random Staff Interviews – The staff randomly selected for interview said they had been trained how to do cross gender searches and searches of transgender inmates. Female staff said they have done cross gender pat searches of inmates. The search described for transgender inmates at FRDC was similar to the search of a female inmate.</p> <p>Inmate Interviews – Some inmates said they have been pat searched by female staff. They felt the search was appropriate and professional and not too invasive. None said they had been subjected to a cross-gender strip search. Transgender inmates said pat searches by staff were not too intrusive and were appropriate.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires staff to “provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” LEP inmates will be provided the PREA video transcript and PREA brochure in their native language. If these cannot be translated into their native language, the PREA site coordinator will utilize an interpreter to assist the inmate in understanding the material. “Offender interpreters shall not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.”</p> <p>The facility reported no inmates were LEP at the time of the onsite audit. A contract for interpretive services was provided that would indicate the facility has access to a service that provides language interpreters or sign language interpreters.</p> <p>Intake Staff Interview – Intake staff said the facility has some staff designated as interpreters. He said the facility had an interpretive service by telephone that could be used when staff cannot interpret. The PREA brochure is in Spanish or can be provided in other languages. If an inmate cannot read, the PREA brochure is read by staff. A video is shown that provides the information through audio and closed captions. If an inmate cannot read, he reads the brochure to them. If an inmate cannot hear, he can communicate with them in writing. Inmates with cognitive disabilities will receive the PREA education individually from staff to ensure they understand the material.</p> <p>Random Staff Interviews – The staff interviewed either knew or thought there was an interpretive service the facility could use for LEP inmates. They said the shift supervisor would be notified when it was needed and could access it.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.</p>
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115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not hire or promote any person, staff member, or enlist the services of any contractor that may have contact with an offender when it is known that he: a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. has been</p>

convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or c. has been civilly or administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse.”

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background screening, candidate selection, maintenance of employee records, employee discipline, and labor organizations.”

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before hiring new staff members a worksite personnel staff member or designee shall: a. perform a criminal background records check; and b. attempt to contact all prior institutional employers, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background screening.”

Human Resource Staff Interview - HR staff said criminal background checks and pre-employment background checks are completed for all new hires and promotions. She reviews prior discipline issues that would include sexual harassment. Issues with sexual harassment history would be considered in hiring and promotion decisions. If applicants have prior corrections experience, a designated staff calls the prior employer for a pre-employment PREA check to inquire about substantiated sexual abuse investigations or resignations during a sexual abuse investigation.

Document Review – Records were reviewed for ten randomly selected staff hired in the last year. All ten had a criminal background check completed prior to their hire date. All applicants are asked on the MODOC application if they have ever worked or volunteered for a prison, jail, lockup, community treatment center, mental health facility, alcohol or drug rehabilitation center, juvenile facility or other correctional facility. If they answer yes, a Pre-Employment PREA Check form is completed by staff that calls the prior employer to ask if the applicant has ever had a substantiated sexual abuse or sexual harassment investigation or resigned during an investigation. None of the new hire staff had previously worked for an institutional employer.

d) Missouri DOC policy D2-2.2 Background Investigations states “Contract staff members, volunteers, and student interns shall have a background investigation conducted that consists of the criminal history check and any violations that have been reported to pertinent professional licensing and/or certification organizations if applicable.”

Human Resource Staff Interview – HR staff said criminal background checks are conducted for all contract staff prior to working at the facility. The completed criminal background checks are retained in the HR office.

Document Review – Criminal background checks were requested for ten contract staff. Four were provided for review. A second request for the six missing records was made by this auditor. The facility must either provide the criminal background check or have a new check completed and provided for review.

e) Missouri DOC policy D2-11.14 Annual Employment Requirements Section III. A requires an annual criminal background check to be completed on the birth month of every employee.

Human Resource Staff Interview – HR staff said she requests a criminal background check be completed on staff annually during their birth month. A criminal background check for contract staff is also completed annually during the birth month.

Document Review – Criminal background checks for seven current staff were requested. Four were received that were less than five years old. Three have not been received.

f) Human Resource Staff Interview – HR staff said new hire staff and staff applying for promotions are asked questions about (a) 1-3 of this standard on applications for employment. Staff are not required to complete a self-evaluation annually and are not asked these questions again. Contract staff are asked the required questions on an Application for Facility Access form or a PREA-Contracted Staff form.

Document Review – The questions required by this standard are asked on all applications for the Missouri DOC. The applications for ten staff hired in the last 12 months were reviewed. All ten had questions on the application that asked about prior convictions or civil judgments for sex offenses and prior sexual abuse in an institution.

g) Missouri DOC policy D2-2.2 Background Investigations states “False information regarding substantiated allegations of offender or resident abuse and/or harassment on the employment application shall be grounds for termination.”

h) Human Resource Staff Interview – HR staff said if another correctional institution contacts the Missouri DOC to inquire about substantiated allegations of sexual abuse or resignations during investigations of a former employee, they will provide information on the substantiated sexual abuse or resignations.

CORRECTIVE ACTION REQUIRED: The criminal background checks for four current staff and six contract staff must be provided for review. If the facility does not have the documents, new criminal background checks must be completed for all staff and contract staff that are missing.

Corrective Action Completed: The criminal background checks were provided for the four current staff and the six contract staff. Criminal background checks were provided for all staff and contract staff that meet the provisions of the standard.

The facility meets the provisions of the standard based on the interviews, policies and

	documents reviewed.
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) The facility reported on the PAQ no substantial expansion or modification since the last PREA audit.</p> <p>Agency Head Interview – The Director said the agency designs expansion and modifications to maximize the agency’s ability to protect inmates.</p> <p>Warden Interview – The Warden said there have been no expansion or modifications since the last PREA audit. If there are any, improving inmate monitoring based on the requirements of the PREA standards would be considered in the design.</p> <p>b) The facility reported on the PAQ improvements were made to the video monitoring system since the last audit.</p> <p>Agency Head Interview – The Director said MDOC uses video monitoring to target secluded or blind areas where offenders may become victimized. The video cameras do not ever take the place of direct supervision but supplements our supervision of offenders to ensure the safety and security of the offenders, staff, and facility.</p> <p>Warden Interview – The Warden said the video monitoring system was upgraded with the addition of HD cameras and an improvement in the recording storage capacity of the system in the last year. This was done to improve inmate monitoring and aid in the investigation of sexual abuse as well as other incidents. The PREA Site Coordinator was involved in the project to provide guidance based on the PREA standards.</p> <p>The facility meets this standard based on the information from interviews.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” The policy also instructs staff to take steps to protect evidence. This may include instructing the victim not to shower, change clothes, brush teeth, eat,</p>

drink, or use the bathroom. If possible, staff should not allow the inmate perpetrator to destroy evidence by preventing showering, changing clothes, eating, drinking, or using the bathroom.

b) MODOC policy D1-8.13 provides a time frame of 72 hours for possible collection of forensic evidence the same as found in the National Protocol for Sexual Assault Medical Forensic Examinations.

c) MODOC policy D1-8.13 requires the facility health services staff to contact the on-call SANE staff member if the alleged incident occurred within 72 hours. The policy states "The SANE staff member shall collect evidence according to established forensic procedures for processing and document the exam and finding in the applicable department computer system." "If the alleged perpetrator is a staff member, the victim shall be transported to the community emergency room for a sexual assault examination to be performed by a SANE or SAFE." If the alleged perpetrator is an inmate, the shift supervisor shall contact the on call SANE staff member and hold the victim in medical until the SANE staff arrive.

The facility reported on the PAQ no forensic examinations were conducted for inmates at FRDC during the past 12 months.

Medical Staff Interview - The Medical Regional Director said SANE staff are on call. If there has been a sexual abuse incident with penetration, medical staff would contact the SANE staff. If the SANE staff were not available, the inmate would be sent to the ER at the local hospital.

SANE Staff - The Nursing Director/SANE said she covers the eastern region and is on call to conduct a forensic exam when needed. She said there are eleven trained SANE nurses for the MODOC with five in the eastern region, two in the central region and four in the western region. If she or other SANE staff are not available, the inmate would be transported to a nearby hospital ER with forensic exam services.

d-e) The MODOC does not have an agreement with a victim advocate organization. Due to the lack of local rape crisis centers in the state, the facility has staff that have attended victim advocate training provided by the Missouri Coalition Against Domestic Violence to qualify them to provide victim advocate services for inmates at FRDC. The certificate for completion of the training was provided for FRDC's Chaplain.

Victim Advocate Interview - A victim advocate qualified staff said he completed an online training. He is notified by the shift supervisor if there is an incident of sexual abuse reported and will report to the facility during off hours. He said the training covered victim care and covered the process of the forensic examination.

Conversations with the victim are confidential unless there is information provided that is a safety or security concern. He said he can provide victim advocate services for a forensic exam at the facility or at the hospital. He also provides victim advocate services for the victim during investigator interviews if requested.

PCM Interview - The DW/PREA Site Coordinator said the Chaplain and a Case Manager

	<p>have completed online training that qualifies them as a victim advocate. Both can provide victim advocate services for an inmate victim at the investigation interview and at a forensic examination.</p> <p>Document Review – Eleven investigations were reviewed. Victim advocate services were offered to the victim in all six sexual abuse investigations at the investigator interview. Victim advocacy was also offered in all sexual harassment investigations as well.</p> <p>h) Training Certificates were provided for all staff designated as qualified victim advocate staff.</p> <p>The facility meets the provisions of this standard based on information from the interviews, documents and policies reviewed.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>The facility reported on the Pre-Audit Questionnaire 15 allegations of sexual abuse and sexual harassment that resulted in 15 administrative investigations during the past 12 months. Eleven completed investigations were provided to this auditor for review. Six were investigations of sexual abuse and five were investigations of sexual harassment.</p> <p>Agency Head Interview – The Director of the Office of Professional Standards was the Agency Head designee for interview and is responsible for the PREA Unit in the office of Professional Standards. He said investigations are completed for all allegations of sexual abuse and sexual harassment in all facilities. The PREA Unit conducts investigations of sexual abuse allegations and the Institutional Investigators conduct investigations of sexual harassment.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” This policy was found posted on the Prison Rape Elimination Act page of the Missouri DOC website at https://doc.mo.gov/programs/PREA. Policy D1-8.4 Institutional Investigations covers requirements for investigations in general. The policy is identified as confidential; therefore, it cannot be posted on the MODOC website.</p>

	<p>Investigator Interviews – Both the Institutional and PREA Unit Investigators were interviewed. The Facility Investigator said he investigates only sexual harassment allegations. If a PREA report is clearly an incident of sexual abuse, a Request for Investigation is completed and sent to the PREA Unit. If the allegation is sexual harassment it stays with the Institutional Investigator. If it is not clear what type of incident is being reported, the facility investigator gathers more information to determine if it is sexual abuse or sexual harassment. Once it is determined to be sexual abuse, it is referred to the PREA Unit Investigator. The PREA Unit Investigator said she is contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.31	Employee training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All staff members shall receive initial PREA training during the department's basic training.”</p> <p>PREA Basic Training Curriculum – The PREA Basic training curriculum was provided for review. It covers the zero-tolerance policy of MODOC; staff responsibilities in prevention, detection, reporting and response procedures; inmate’s rights to be free of sexual abuse, sexual harassment and retaliation; staff rights to be free from retaliation; dynamics of sexual abuse; reactions of victims; how to detect signs of sexual abuse; avoiding inappropriate relationships with inmates; and mandatory reporting laws. The curriculum did not cover professional communication with LGBTI inmates. However, The Professional Boundaries lesson plan was provided for review that provides staff information on how to communicate effectively and professionally with LGBTI inmates. This training is all provided at the Basic Academy in a pre-service training for new hires.</p> <p>Staff Interviews - Staff said they completed the PREA Basic Training at the MODOC Academy. Staff could demonstrate knowledge of zero-tolerance policy, rights of inmates and staff, how to detect signs and response of sexual abuse, the dynamics of sexual abuse, avoiding inappropriate relationships with inmates, and their actions in response to a sexual abuse report.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the</p>

	<p>time of assignment.”</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All staff members shall complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. Years in which an employee is not required to complete training, the facility site coordinator shall provide refresher information on current sexual abuse and sexual harassment policies.”</p> <p>PREA Refresher #1-12 - After the PREA Basic is completed at academy, staff are required to complete a PREA Refresher training modules every two years. These modules were reviewed and found they did not cover the required topic in (a) 10 mandatory reporting for victims under 18 and vulnerable adults. Topics (a) 1-9 are covered in the refresher training.</p> <p>Staff Interviews – staff said they complete a PREA Refresher training every 2 years and receive emails monthly between trainings that provide information about PREA. Staff demonstrated knowledge of all required topics except mandatory reporting laws.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All completed PREA training requires a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed the training. This form must be routed through the facility training officer or regional training coordinator.”</p> <p>CORRECTIVE ACTION REQUIRED: Information must be added to the bi-annual refresher training that covers mandatory reporting laws for victims under 18 or vulnerable adults. The revised curriculum will be provided for review and documentation of communication to the staff of the change.</p> <p>Corrective Action Completed: The training curriculum for the PREA Refresher training was updated with information pertaining to the mandatory reporting laws that require the facility to contact the Missouri Department of Social Services-Children’s Division for inmates under 18 that are a victim of sexual abuse or the Department of Health and Senior Services for inmate victims of sexual abuse that are vulnerable adults. The training curriculum update was sent via email to all FRDC staff and will be included in the revised curriculum for future training.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All part-time employees, volunteers, and contract staff members shall receive PREA</p>

	<p>training specific to their classification as determined by the appropriate division director and chief of staff training.”</p> <p>Training Curriculum – The PREA training curriculum for volunteers and contractors was provided for review. The curriculum provides volunteer and contract staff with the MODOC zero-tolerance policy, rights of inmates, signs of sexual abuse, MODOC’s response process, dynamics of sexual abuse, reactions of victims, and how to respond to a report of sexual abuse.</p> <p>c) Document Review – PREA training completion documents were requested for ten contract medical and mental health staff. PREA training acknowledgement forms were provided for three contract staff. Records for the six were requested again. A list of volunteers was requested for selecting volunteers for training completion review. The list has not been received.</p> <p>CORRECTIVE ACTION REQUIRED: The facility must provide PREA training documentation for the contract staff requested and a list of volunteers so selections can be made and documents provided for review.</p> <p>Corrective Action Completed: The PREA training completion records were provided for all twenty-two current volunteers and all selected contract staff. The records of completion meet the provisions of this standard.</p>
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115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” The policy requires the facility to have the PREA offender brochure in several recognized languages. If the brochure is not available in the inmate’s language, then an interpretive service will be utilized to provide the information. The PREA offender brochure was provided in seven additional languages. The policy also requires the facility to make PREA reporting information available or visible to all inmates through posters, the offender rulebook, tablets and the brochure. Policy requires the inmates to sign an acknowledgment receipt for viewing the video and receiving the PREA offender brochure.</p> <p>Tour Observations – A PREA education could not be observed during the onsite audit. While touring the intake area, the PREA education process was explained by the Case Manager and the PREA Site Coordinator/DW. PREA posters were observed throughout</p>

	<p>the facility in inmate housing unit, program areas, recreation areas, dining hall, medical waiting area and inmate work areas. The posters provided information on how to report sexual abuse and sexual harassment and were printed in English and Spanish. They were placed at a height and in a print size that inmates could easily read. The PREA brochure was provided in both English and Spanish. The brochure provides inmates with information on what is an incident of sexual abuse or sexual harassment, the zero-tolerance policy for MODOC, prevention, reporting, and victim rights.</p> <p>Inmate Interviews – Forty-one inmates were interviewed. Thirty-eight inmates said they received the PREA education information on the first day at the facility. All said they received a PREA brochure. Most said they were shown a video about PREA that provided information also. Staff explained the information and asked if they had any questions. Only two inmates said they did not get the information. All inmates interviewed said they see the PREA reporting information posters in the facility. All inmates knew several ways to make a report of sexual abuse or sexual harassment.</p> <p>Intake Staff Interview – The Case Manager who provides the PREA education at the Reception and Orientation Unit said he provides the PREA education information the first 2 hours the inmates are at the facility. He shows the video at the intake area. The video is also played two times a week in the R&O Unit on the TV's. He said he meets with the inmates individually to ensure they understand the information. If an inmate is LEP, the facility has some staff designated to interpret for some languages like Spanish. The facility also can access a telephonic interpretive service. He also can provide the brochure in several other languages. If an inmate has a hearing disability, the video has closed captioning. If an inmate cannot read, he reads the information to them. He explains the zero-tolerance policy, inmate rights, anonymous reports to the Crime Victim Unit, and victim advocacy services available.</p> <p>CORRECTIVE ACTION REQUIRED - The PREA education completion documents were requested for all Forty-one inmates. The documents have not been received. The facility must provide documentation of the PREA education completion for all Forty-one inmates.</p> <p>Corrective Action Completed: The PREA orientation (education) completion documents were provided for all forty-one inmates. The facility meets the provisions of the standard based on the interviews, policies and documents reviewed.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Investigators assigned to investigate offender sexual abuse allegations shall receive specialized PREA investigator training." The policy reflects the provision's

	<p>requirement.</p> <p>Training Curriculum – The NIC PREA: Investigating Sexual Abuse in a Confinement Setting was reviewed by this auditor. The training covers the investigation standards, Miranda, Garrity, evidence collection, forensic examinations, interviewing techniques, understanding the victim, and evidence requirements for substantiating administrative cases or for making a prosecutorial referral. The curriculum covered the requirements of the standard.</p> <p>PREA Unit Investigator Interview – A PREA Unit Investigator and FRDC Investigator were interviewed. The PREA Unit Investigator said she completed the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting and the advanced NIC investigations course. She also has completed sexual abuse investigation training through VAWA as well.</p> <p>Facility Investigator Interview - The FRDC Investigator said he has completed the MODOC PREA investigation training. The PREA Coordinator provides a one-day investigation training every two years.</p> <p>Document Review - The NIC PREA Investigations training certificates were provided for the twelve PREA Unit Investigators.</p> <p>The facility meets the standard based on the information from interviews, documents and policies reviewed.</p>
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115.35 Specialized training: Medical and mental health care	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Health services staff members shall receive specialized PREA medical and mental health training.”</p> <p>Training Curriculum – The Centurian PREA Overview training curriculum was provided for review. The curriculum is medical contractor’s specialized medical training that all medical and mental health staff complete. The curriculum comes from Relias training. The training curriculum provides information about what is sexual abuse and sexual harassment; how to detect and assess sexual abuse and sexual harassment; preserving physical evidence; how to respond and communicate with victims; how medical and mental health staff are to report any knowledge or suspicion of sexual abuse and sexual harassment. The training curriculum covers the requirements of this provision of the standard.</p> <p>b) Medical Staff Interview – The Medical Regional Director said she has completed the specialized medical training through Relias. She said all medical staff</p>

	<p>complete an annual PREA training. The specialized medical training covers how to detect and assess signs of sexual abuse and sexual harassment, what medical staff can do to preserve physical evidence, responding to victims, and who to report allegations or suspicions to.</p> <p>Mental Health Staff Interview – The mental health staff said she receives specialized medical training through Relias annually. The training has a trauma informed approach. The training covered protection of evidence, signs of sexual abuse, communication with victims, and reporting sexual abuse and sexual harassment.</p> <p>c) The facility was asked to provide documentation of the specialized medical training for ten randomly selected medical and mental health staff. The documents have not been provided. Though the staff said they received the training in interviews, the facility must provide training completion certificates.</p> <p>d) The facility provided documentation of PREA training completion for two out of ten randomly selected medical and mental health staff. The facility must provide documentation of the completion of training for the eight staff or have the staff complete the training as required by the standard.</p> <p>CORRECTIVE ACTION REQUIRED: The facility must provide documentation for completion of specialized medical training and PREA training for the staff selected or have the staff complete the training if it has not been done.</p> <p>Corrective Action Completed: The PREA training completion documents and specialized medical training completion documents for all staff selected were provided for review. All training documents were found to meet the standard. The facility meets the provisions of this standard based on interviews, policies and documents reviewed.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All offenders shall be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding offender housing assignments, transgender and intersex offenders and the probation and parole procedures regarding housing assignments, transgender and intersex clients, and contracted residential facilities.” The policy requires an assessment for risk of victimization and abusiveness.</p> <p>Risk Screening Staff Interview – The staff that conduct risk screening said all inmates that arrive at FRDC are screened on the day of arrival for risk of victimization and risk</p>

of abusiveness.

Inmate Interviews – Randomly selected inmates said they could recall meeting with a Case Manager privately and being asked questions about prior victimization, sexual orientation, gender identity, disabilities, and their views of vulnerability to sexual abuse in the first day in the intake area. Four inmates could not recall being asked questions or claimed they were not asked the questions.

b) Missouri DOC policy IS5-2.3 Offender Internal Classification states “CCMs will conduct a new internal classification within the first 72 hours at that facility and the offender will be housed in accordance with the new internal classification score.” The policy requires a new risk assessment to be completed within 72 hours of arrival at the facility.

Document Review – Intake risk assessments for forty inmates were reviewed. Thirty-nine were completed within 72 hours of arrival at FRDC for substantial compliance with the standard. Thirty-eight were completed on the day of arrival.

c) Missouri DOC policy IS5-2.3 Offender Internal Classification states “Facilities shall assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities.” The risk assessment was provided for review. The factors in the assessment were found to be objective.

d) Risk Screening Staff Interview – The staff that complete the risk screening said he meets with inmates in private in the intake area to ask questions to gather information to complete the risk screening. The questions are about prior victimization; prior perpetration; feelings of vulnerability; disabilities; identifies as or is perceived to be LGBTI or gender nonconforming. He also reviews the inmate records for additional information on criminal history, conduct history, age, size description, sex offenses, and violent offenses. Because FRDC is an intake to the agency, an inmate record may not be put together yet. He may have to ask them questions about their criminal history and conduct history that he would normally find in the record. The record is available by the time the reassessment is completed.

Document Review – The Internal Classification Risk Assessment was reviewed and found to assess risk of victimization for the following factors: disabilities, age, inmate build, prior incarceration, prior conviction for sex offense with a Child victim, LGBTI or Gender non-conforming, prior victim of sexual abuse, and perception of vulnerability. Inmates are not detained solely for civil immigration in the MODOC. The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet this provision of the standard.

e) Document Review - The Internal Classification Risk Assessment was reviewed and found to assess risk of abusiveness for the following factors: prior

sexual abuse – prior conviction for sex offense with Adult victims; prior convictions for violent offenses – prior convictions for violent crimes; history of prior institutional violence or sexual abuse – conduct for violent offenses past 10 years and conduct violation for murder or forcible sexual conduct older than 5 yrs but less than 10 yrs.

Though there is an assessment for prior sexual abuse involving adults, not assessing for sex offenses with child victims does not assess for any or all prior sexual abuse.

The time restriction on forcible sexual conduct prevents assessing for that conduct that is outside of the timeframe. This doesn't assess for all prior sexual abuse while incarcerated. This does not meet this provision of the standard.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be reassessed within 30 days of arrival. The reassessment shall consider additional relevant information received by the facility after the initial intake screening."

Risk Screening Staff interview – Staff said he meets with inmates two weeks after intake to complete the reassessment of the risk screening. He asks the same questions for the reassessment as he did for the intake assessment. He completes a whole new assessment based on the inmate's answers and the information from the inmate record.

Inmate Interviews – Most inmates said they were asked the same questions from the intake meeting a second time about two weeks later. Some did not recall being asked the questions a second time.

Document Review – Risk screening reassessments were reviewed for thirty-nine inmates at FRDC for over 30 days. The reviews were completed between 10 to 14 days after arrival. Though this meets the standard, it is recommended that the reassessments be completed at twenty-five days after arrival to allow the inmate time to acclimate to the facility and staff and to allow time for additional information that may come from other facilities or the court.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender's risk level shall be reassessed when warranted due to a referral, incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness."

Risk Screening Staff Interview – Staff said if new information is received that changes the answers to the last screening, a new assessment is completed. If there is a substantiated incident of sexual abuse, he will do a new assessment as well.

h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender shall not be disciplined for refusing to answer or not disclosing complete information during the assessment."

Risk Screening Staff Interview – staff said inmates do not have to answer the questions for the risk screening and refusing will not result in discipline.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states

"The chief administrative officer (CAO) or PREA site coordinator shall control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders."

PREA Coordinator Interview – The PREA Coordinator said information obtained for the risk assessment is confidential and access to the electronic system the assessments are completed in is controlled and limited to the staff that need to complete assessments and the staff involved in reviewing them.

Risk Screening Staff – Staff said the information provided by the inmate at the assessment interview is confidential. Access to the electronic system where assessments are stored is limited to staff that compete or review the assessments.

CORRECTIVE ACTION REQUIRED: The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet provision (d). There is an assessment for prior sexual abuse involving adults, not assessing for sex offenses with child victims does not assess for any or all prior sexual abuse. This does not meet provision (e). Some reassessments were found to be completed beyond 30 days. Provision (f) is not being followed at times and assessments will need to be reviewed for completion within proper time frames. The internal classification risk assessment must be modified to meet provision (d) and (e). Once the modification is approved, completed assessments must be provided for review of use within required time frames in the standard.

Corrective Action Completed: The MODOC PREA Coordinator and Director of Office of Professional Standards said the risk assessment is completed in an electronic computer system that will take more time to modify than is allowed in the corrective action period. As a result, an agreed upon corrective action was developed. The process to complete the assessment was modified by using comment sections in the current assessment to document changes in what is being assessed on specific factors until the MODOC can make permanent changes to the assessment in the electronic system. There were changes to five factors being assessed on the current assessment that had been identified as not meeting the standard.

- Adult victim was added to victimization question 14 for prior sex offense convictions. A comment will be added for scoring Adult victim in addition to the current Child victim.
- Exclusively non-violent criminal history factor in the victimization section will be scored as an override when the answer is No to question 17 in the risk of abusiveness section that scores convictions for crimes of violence. If the answer is No and the victimization section score is 2 points, the staff will complete an override to a Sigma (risk of victimization) in number 20 for the inmate having a non-violent criminal history. Non-violent criminal history will be placed in the comment section.
- Child victim was added to risk of abusiveness question 16 in addition to Adult victim. The comment Child Victim is added if the answer is Yes and the victim is a child.

	<ul style="list-style-type: none"> • Staff were instructed not to follow the time limitations on questions 18 and 19. A Yes response will be given for any institutional conduct history for violence or sexual abuse with comments added to document the information being outside of the time frames. <p>The changes were added to the training manual for the risk assessment and training was provided to the staff that complete risk assessments at FRDC on August 22, 2024 by the PREA Unit Manager. The new assessment process was put in place at FRDC following the training. A sample of intake assessments and 30-day reassessments completed during August and September were provided for review each week. A total sample of twenty-five intake assessments and twenty reassessments were reviewed for use of the new process. All were completed in the correct time frames and using the new process for scoring. The MODOC will continue to work toward changes in the electronic risk assessment that makes these changes permanent.</p>
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115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This shall be in accordance with the institutional services procedures regarding offender housing assignments, transgender and intersex offenders, offender recreation and activities, and probation and parole procedures regarding community supervision centers, the community release center, and contracted residential facilities."</p> <p>Missouri DOC policy IS5-2.3 Offender Internal Classification states "The department utilizes an internal classification system to assist department staff members in determining appropriate housing, programs, and work assignments of offenders to ensure offender safety, institutional security, and compliance with the Prison Rape Elimination Act (PREA) guidelines." This policy provides the procedures for completing the PREA risk assessment. The risk assessment is used to guide the placement of inmates in housing assignments and programs. Inmates who are high risk of victimization (Sigma) are not housed in the same cell with inmates who are high risk of abusiveness (Alpha). The facility has a housing assignment report with the internal classification identified on the report. This allows staff to monitor placement based on Sigma, Alpha or Kappa (no risk).</p> <p>Missouri DOC policy IS18-1.1 Required Activities requires housing unit staff to utilize internal classification information to designate required assignments for the purpose of keeping separate and/or ensuring appropriate monitoring of inmates at high risk of</p>

being sexually victimized from inmates that are at high risk of being sexually abusive when working or attending programming together.

The policies meet the requirements of this provision of the standard.

Risk Screening Staff Interview - staff said the risk assessments create a flag for risk of victimization (Sigma) or risk of sexual abusiveness (Alpha). These flags are used to determine housing placement and may be used for program assignments. Inmates that are placed on separate wings in the housing units based on PREA flags.

PREA Compliance Manager Interview – The PREA Site Coordinator said the Sigmas are housed on their own wing and Alphas are housed on other wings. They are never in the same two-man cell. The Case Manager runs a report from the offender information system with the flags to monitor for correct placement daily.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive.”

c) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee is responsible for determining a permanent housing assignment for each transgender or intersex offender, and prior to this assignment shall meet with each offender to determine his vulnerability within the general population and length of time living as the acquired gender. Transgender and intersex housing assignments shall not be made based solely on genitalia but must consider the offender’s health and safety and the security of the facility through a review of the respective classification, medical and mental health records.”

Missouri DOC policy IS5-3.3 Transgender and Intersex Offenders provides the process for review of an offender that has identified as transgender or intersex at the risk assessment. The staff that conduct the risk assessment notify the PREA Site Coordinator of the transgender or intersex identification. The Transgender Committee consists of the PREA Site Coordinator, medical administrator, mental health chief, medical director. The Transgender Committee has an initial meeting with the offender. The offender then meets with Mental Health to be reviewed for gender affirming items, hormone therapy treatment consideration, and discuss health and safety concerns. The Transgender Committee completes the Transgender Committee Review form and forwards it to the Transgender Review Team in central administration. The Transgender Review Team consists of the PREA Coordinator, deputy division director, director of rehabilitative services.

PREA Compliance Manager Interview - The PREA Site Coordinator said the facility has a facility transgender committee that meets with an inmate who identifies as transgender at the risk assessment or at any time while housed at FRDC. The committee consists of the medical and mental health directors, classification staff and unit management staff. The committee reviews the transgender inmate’s feeling of safety in the facility housing placement and program/work assignments. The

committee also reviews gender affirming items, showering separately and the potential for hormone therapy. The Transgender Committee Review form is completed and sent to the Transgender Review Team in central administration for review and final decision.

Transgender Inmate Interviews – Four inmates who identified as transgender at the assessment interview said they met with the Transgender Committee between a week to a month after arrival. All said they were asked if they had any safety concerns with their facility housing and program assignment.

d) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee shall meet with the offender within 10 working days of either the offender’s arrival to the facility or upon learning the offender’s transgender or intersex status and every 6 months thereafter.”

e) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee review shall include the following: (1) Offender’s view of his vulnerability.”

Risk Screening Staff Interview – The staff who conducts risk screening said the Transgender Committee completes all review with inmates who identify as transgender.

PREA Compliance Manager – The PREA Site Coordinator (DW) said the Transgender Committee would meet with an inmate who identifies as transgender every six months to conduct a review of the inmate’s feelings of safety, facility housing assignment, work assignment or program assignment and any concerns about showers. Many inmates stay at FRDC for only 90 days.

Transgender Inmate interview – The four transgender inmates said the Transgender Committee asked them their views of safety regarding their facility housing assignments. All of them said they felt safe in their placement at FRDC.

f) PREA Compliance Manager – The PREA Site Coordinator (DW) said the Transgender Review Committee asks transgender inmates if they want to shower while other inmates in the housing unit are in their cells.

Transgender Inmate Interview – The four transgender inmates said they were asked about showering at a time when other inmates are not out. Some chose not to because individual shower rooms are available.

g) Transgender Inmate Interview – Four transgender inmates said they are not housed in a unit that is dedicated to transgender, gay or bisexual inmates.

The facility meets this standard based on the information from interviews, policies and documents reviewed.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.”</p> <p>MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30-day review.</p> <p>The facility reported no inmates being placed involuntarily in segregation due to being a high risk of sexual victimization during the last year.</p> <p>Warden Interview – The Warden said if an inmate is determined to be high risk for sexual abuse from the assessment, the intake staff would try to find a safe housing assignment in general population. Involuntary segregation would only be used as a last choice.</p> <p>Staff Who Supervise Segregation - A Unit Manager said if an inmate is placed in segregation involuntarily the reason would be documented in the inmate confinement report along with the restrictions. A review of placement in administrative segregation is completed during the first week and then again at 30 days. The review will document that there are no alternative housing options and the restrictions while in segregation. If an inmate cannot be placed safely in open population, they will be transferred to another facility.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request (IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline,</p>

and d. advocacy agency.” The methods of reporting are communicated to inmates in the PREA offender brochure provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC, report to any staff, or calling the PREA hotline.

Random Staff Interviews – Staff said inmates can report sexual abuse or sexual harassment, or retaliation by calling the PREA hotline, telling any staff, writing any staff, filing a grievance, or having family report for them. Most knew inmates could write to the Crime Victims Unit and be anonymous.

Inmate Interviews - Inmates said they could privately report retaliation, sexual abuse or sexual harassment by telling any staff, write staff by dropping a “kite” in the mailbox or call the PREA hotline. Most thought they could make an anonymous report by not putting their name on the written report and dropping it in the mailbox. Some were aware of the anonymous report to an external organization they saw on a poster. All inmates were aware of multiple ways to make a report of retaliation, sexual abuse or sexual harassment.

Tour Observations – PREA reporting information posters were seen posted in inmate housing units by inmate phones or entrances, recreation areas, medical waiting rooms, intake waiting area, and the canteen waiting area. The posters were displayed so that inmates could easily read them. The information is also available on the inmate tablet. PREA mailboxes were observed on each housing unit in addition to regular mailboxes. The PREA mailboxes were located in the core area of each housing unit. Other inmates could see someone drop a written report in these mailboxes through the windows from the wing units and would know it is for a report of sexual abuse and sexual harassment. It is recommended that there not be a dedicated mailbox for PREA reports. Allowing inmates to drop a written report in a multi-use general mailbox would aid in concealing why they are putting mail in the box.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail and not subject to examination.” The policy requires an external reporting method that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure.

PCM Interview – The Deputy Warden (PCM) said inmates can report to the Department of Public Safety by writing to the address on the posters and in the PREA brochure. This correspondence is treated as privileged and cannot be read or censored. Inmates can leave their name off the envelope and correspondence if they want to remain anonymous. It will still be mailed without their name on it.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure.”

	<p>Staff Interviews - Staff said they are required to take any verbal, written, anonymous or third-party report. When they receive a verbal report, they are required to document that report and the steps they followed conveying the information as required in a written incident report. This report must be turned in immediately or prior to leaving the shift.</p> <p>Inmate Interviews – Inmates said they can make a report privately by calling the PREA hotline or telling their Case Manager.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct.” The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.</p> <p>Random Staff Interview – Staff said they could privately report information about sexual abuse or sexual harassment by calling the ethics line or the PREA hotline. They could also complete an IOC and email it to a supervisor. Posters for the ethics line (CLEAR Line) were observed in staff break areas and PREA Hotline posters are throughout the facility.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>b) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not impose a time limit on when an offender may submit a complaint regarding an allegation of offender sexual abuse.” “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.” “Nothing in this section shall restrict the agency’s ability to defend against an offender lawsuit on the ground that the applicable statute of limitations has expired.” The policy allows for any complaints regarding sexual abuse to bypass the informal process and proceed immediately to grievance stage.</p> <p>c) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.”</p>

d) Missouri DOC policy D5-3.2 Offender Grievance states "Offender grievances alleging sexual abuse shall be processed as follows: If determined to be a non-emergency the CAO or designee shall respond within 30 calendar days of receipt. Non-emergency offender grievance appeals alleging offender sexual abuse shall be processed as follows: a response shall be provided as soon as practical, but no later than 60 calendar days of receipt. Computation of the 60 day time period shall not include the days between the offender's receipt of the offender grievance response and receipt of the offender grievance appeal by the offender grievance unit at central office. Appeals shall be referred to the deputy division director or designee. An extension of time to respond, of up to 70 calendar days, may be claimed if the normal time period for response is insufficient to make an appropriate decision. The offender shall be notified in writing of such extension and shall be provided a date by which a response shall be provided. During the administrative process, including the offender grievance appeal level, if the offender does not receive a response within the time allotted for a reply, including extension, the offender may proceed to the next level of the offender grievance process."

There were no sexual abuse or sexual harassment investigations where the inmate reported through a grievance.

e) Missouri DOC policy D5-3.2 Offender Grievance states "Third Party Reporting: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, shall be permitted to assist offenders in filing requests for grievances or appeals relating to allegations of offender sexual abuse. This assistance cannot interfere with the safety and security of the institution. When a staff member receives the documentation from the reporting third party, it shall be attached to the grievance form and shall immediately be recorded in accordance with this procedure. A copy of the documentation shall also be forwarded to the CAO or designee in order to be attached to the possible investigation or inquiry. The CCM shall attempt to discuss the issue with the offender (victim) prior to developing a response to confirm if the alleged victim agrees to have the request filed on his behalf. If the offender declines to have the request processed on his behalf, the CCM shall document the offender's decision and the complaint shall be considered withdrawn for grievance purposes."

f) Missouri DOC policy D5-3.2 Offender Grievance states "If the CAO or the PREA site coordinator determines that the complaint meets the definition of a PREA emergency grievance, the grievance shall be addressed as follows: The CAO or designee shall prepare an initial response which shall be attached to the grievance and provided to the offender within 48 hours of receipt of the initial filing date. The offender shall sign and date the response. A final response from the CAO or designee shall be provided to the offender within 5 calendar days from the initial filing date. The offender shall sign and date the form. The initial and final response for the grievance shall document the department's determination whether the offender is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance."

The facility reported on the PAQ that no emergency grievances were received in the

	<p>last 12 months.</p> <p>g) The facility reported no disciplinary action against an inmate for filing a grievance alleging sexual abuse in the past 12 months.</p> <p>The facility meets this standard based on the information from interviews, documents and policies reviewed.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall offer alleged victims of offender sexual abuse, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, during the investigative process. When an allegation of sexual harassment is forwarded for investigation, the alleged victim of sexual harassment will be offered a victim advocate. Offenders shall be allowed to communicate with an advocate by mail or special visit in a confidential manner as possible to maintain safety and security of the institution.”</p> <p>Inmate Interviews - Most Inmates were aware there were services available for victims of sexual abuse through the victim advocate staff at the facility. Some knew there might be a victim advocate organization outside of the facility that they could write or they knew there were staff that could provide the services. Some inmates said they didn’t pay attention when staff were covering it at orientation or they didn’t need the information on the posters.</p> <p>Tour Observations - During the tour, Victim Advocate posters were observed in housing units and other areas inmates frequent. The posters contain the addresses for Just Detention International and Rape, Abuse and Incest National Network.</p> <p>Victim Advocate Interview - A victim advocate qualified staff said he completed an online training. He is notified by the shift supervisor if there is an incident of sexual abuse reported and will report to the facility during off hours. He said the training covered victim care and covered the process of the forensic examination.</p> <p>Conversations with the victim are confidential unless there is information provided that is a safety or security concern. He said he can provide victim advocate services for a forensic exam at the facility or at the hospital. He also provides victim advocate services for the victim during investigator interviews if requested.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before being given access to a victim advocate, the offenders shall be informed of the extent to which communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory</p>

	<p>reporting laws.”</p> <p>Document Review – Victim Advocate posters have a statement at the bottom informing inmates that letters to the victim advocate organizations will be confidential and not subject to examination by staff.</p> <p>Victim Advocate – This auditor contacted Just Detention International to ask if correspondence has been received from an inmate at the Fulton Reception Diagnostic Center during the review period. A response was received stating there had been no correspondence received from an inmate at FRDC.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If a facility is unable to enter into a MOU with the advocacy center, the attempt shall be documented and advocacy services shall be provided by a qualified staff member.”</p> <p>PREA Coordinator Interview – The PREA Coordinator said he is communicating with the Missouri Coalition Against Domestic Violence to attempt to obtain an MOU for victim services for all Missouri DOC facilities through correspondence or a hotline.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Facility Tour Observation– Posters were observed during the tour in the visiting room that provided visitors with information for reporting sexual abuse and sexual harassment to the PREA Unit of the Missouri DOC. The mailing address, email address and telephone number are on the poster. The poster informs family and friends that the MODOC has zero tolerance for sexual abuse and sexual harassment. The poster says “Friends, family or anyone outside of the facility may report sexual abuse or sexual harassment for an offender.”</p> <p>MODOC PREA Webpage – The Missouri DOC PREA webpage provides information under the Friends and Family section for reporting sexual abuse and sexual harassment by calling, writing or emailing. This was observed at https://doc.mo.gov/programs/PREA.</p> <p>Inmate Interviews – Inmates said their family could report an incident of sexual abuse or sexual harassment for them by calling the number in their PREA brochure. Some said they see posters that say their family can report and how.</p> <p>The facility meets the standard based on information from observations and interviews.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Failure to report offender sexual abuse is a Class A misdemeanor in accordance with Missouri state statute. All staff members, shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure."</p> <p>Staff Interviews – Staff said any knowledge or suspicion of sexual abuse or sexual harassment of an inmate or retaliation against an inmate or staff must be reported by state law. They also said they would have to report if they were aware of staff failing to report</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions."</p> <p>Staff Interviews – All staff said any information from an inmate report of sexual abuse or sexual harassment could not be shared with co-workers. It could only be shared with staff directly involved in the response to the report or the investigation.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Medical and mental health staff members shall inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes."</p> <p>Medical Staff Interview – Medical staff said inmates are notified of their duty to report any information the inmate reveals about an incident of sexual abuse that occurred in a correctional institution. They have the inmate sign a form at intake that tells them about the duty to report and limits of confidentiality.</p> <p>Mental Health Staff Interviews - Mental Health staff said they notify inmates of their duty to report information about sexual abuse in an institution each time they provide services.</p> <p>d) A search of the internet found reports of sexual abuse of a vulnerable adult must go to Adult Protective Services at the Department of Health and Senior Services.</p> <p>PCM Interview – The DW PREA Site Coordinator said sexual abuse incidents involving an inmate under 18 must be reported to Social Services and sexual abuse of a vulnerable adult must be reported to Senior Services.</p> <p>Document Review – In one sexual abuse investigation the inmate reported allegations</p>

	<p>of staff sexual abuse to mental health staff. The mental health staff provided the information to the shift supervisor the same day he received the report. The information was documented in a Sexual Assault Allegation Notification Form completed by the mental health staff.</p> <p>e) Warden Interview – The Warden said all reports of alleged sexual abuse are referred for investigation to the PREA Unit. All allegations of sexual harassment are referred for investigation to FRDC investigators.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>
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115.62	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, shall immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist.” The facility reported zero incidents of imminent risk of sexual abuse in the past 12 months.</p> <p>Agency Head Interview – The Division Director said the facility would immediately remove an offender from a situation that is a substantial risk of imminent sexual abuse. The facility could move the offender to another work, program, housing assignment or place the offender in protective custody and transfer to another facility.</p> <p>Warden Interview – The Warden said If they learn an inmate is at imminent risk of sexual abuse, staff are instructed to stay with the inmate, the shift supervisor will immediately identify the alleged perpetrator and remove them from the inmate that made the report. If the perpetrator cannot be identified, the inmate that reported may have to be moved. try to keep in least restrictive housing if they can.</p> <p>Staff Interview – All staff said if an inmate reported being in imminent risk of sexual abuse, they would immediately take the inmate to a safe place and stay with him while they report to their supervisor and the shift supervisor.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>

115.63	Reporting to other confinement facilities
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving an allegation that an offender was sexually abused while confined at a facility outside of the department, the CAO or designee or the appropriate office shall ensure the outside facility is notified of the allegation within 72 hours. The CAO or designee shall maintain documentation of the allegation received and when the outside facility was notified with the allegation.”</p> <p>Warden Interview – The Warden said if an inmate reports an allegation of sexual abuse that happened at another facility, he would have the PREA Site Coordinator send the information to the other facility head for their investigation within 72 hours. The inmate would be offered mental health services, victim advocacy and monitored for retaliation.</p> <p>The facility did not receive a report of sexual abuse from an inmate that occurred at another facility in the last 12 months.</p> <p>d) Warden Interview – The Warden said if he receives a report about an incident of sexual abuse that occurred at FRDC from another facility head that was reported by a former FRDC inmate, he would follow normal procedures and assign it for investigation.</p> <p>The facility reported receiving no reports of sexual abuse from another facility during the past 12 months.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “In the event of an allegation of a penetration act, the first responder shall take the following steps: (1) Ensure the safety of the victim. (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable. (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (4) The shift supervisor shall make telephone notifications and respond as outlined in the facility’s coordinated response to offender sexual abuse protocol.”</p>

	<p>The facility reported on the Pre-Audit Questionnaire that security staff separated the victim and perpetrator in fifteen allegations of sexual abuse during the last 12 months. None of the fifteen occurred in a time frame or circumstances that allowed for the collection of DNA evidence.</p> <p>Random Staff Interviews - Security Staff said if an inmate reports being sexually assaulted within the last 72 hours they would instruct the victim to not change clothes, shower, brush teeth, eat drink, smoke or use the restroom in order to protect evidence from being destroyed. Non-security staff said they would instruct the victim not to change clothes, shower, brush teeth, eat drink, or use the restroom in order to protect evidence from being destroyed. They would then notify security staff, specifically the shift commander's office and wait for security staff to come take custody of the inmate. All staff said they would separate the victim from other inmates and keep him safe.</p> <p>Document Review – Six of the eleven investigations reviewed were for allegations of sexual abuse. None of the six were in a time frame that allowed for the collection of DNA evidence. In three sexual abuse investigations there were no first responders. One investigation was reported to a non-security staff. The non-security staff then contacted security staff about the report. Two investigations were reported to security staff. In all three, the inmate victim and perpetrator were separated.</p> <p>The facility meets the standard based on information from interviews, polices and documents reviewed.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The facility provided a blank PREA Allegation Notification Checklist as the coordinated response plan. The checklist documents the initial report from the inmate victim and the staff positions that received notification of the report. It is not a coordinated plan as required by the standards. A request for the coordinated plan was made and has not been received.</p> <p>Warden Interview – The Warden said the facility has a plan that provides the actions to be taken in response to a report of sexual abuse. The plan provides the responsibilities for first responders, investigators, medical and mental health, and notification to him and the PREA Site Coordinator.</p> <p>CORRECTIVE ACTION REQUIRED: The facility must provide a coordinated plan for review that provides the actions taken in response to a report of sexual abuse by first responders, medical, mental health, investigators and facility leadership.</p> <p>Corrective Action Completed: The facility provided the Coordinated Response to Offender Sexual Abuse for review. This is FRDC's institutional plan to coordinate staff</p>

	actions in response to an incident of sexual abuse. The plan provides basic roles to staff first responders, medical and mental health staff, the Shift Commander, PREA Site Coordinator, victim advocate staff, and the Chief Administrative Officer or designee. The plan also covers staff response to allegations of penetration and non-penetration incidents of sexual abuse. The facility meets the standard based on information from interviews and documents reviewed.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) MDOC policy D2-11.6 Labor Organization states “Per the Prison Rape Elimination Act, the department shall not enter into or renew any collective bargaining agreements or other agreements that limit the department’s ability to remove alleged staff sexual abusers from contact with any offender or resident pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.”</p> <p>Agency Head Interview – The designee for the MODOC Director said the Missouri DOC does have an active bargaining unit agreement, but it does not limit the agency’s ability to remove staff alleged to have committed sexual abuse away from inmates during the investigation the same as other staff.</p> <p>PREA Coordinator Interview – The PREA Coordinator said the Missouri DOC had a collective bargaining agreement for staff that did not prevent the removal of staff from contact with an offender who alleged sexual abuse by the staff. He said the agreement had expired and had not been renewed. Currently, there is no collective bargaining agreement.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA site coordinator shall ensure victims, individuals who report sexual abuse, and those that cooperate with offender sexual abuse investigations are monitored and protected from retaliation.”</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires the PREA Site Coordinator to offer emotional support services to offender victims,</p>

witnesses, reporters, staff reporters and staff witnesses.

Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.

Warden Interview – The Warden said he has staff designated to monitor for retaliation. If retaliation is suspected, the person retaliating will be separated from the victim. An inmate may be moved or transferred. Staff can be reassigned away from the inmate or put on temporary suspicion.

Retaliation Monitoring Staff – The staff who conducts retaliation monitoring said she is assigned monitoring when the monitoring form is emailed to her. She said she has an initial meeting with the inmate victim. She informs the inmate she will meet with them every 30 days and they can contact her between meetings if they have concerns about retaliation.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The alleged victim of offender sexual abuse shall be monitored for a minimum of 90 days to assess any potential risk or act of retaliation. The assessment-retaliation status checklist form shall be used during each of the assessment interviews. If the victim expresses fear of retaliation, monitoring shall continue for an additional 90-day period or until the victim or reporter is no longer in fear of retaliation or if the investigation is unfounded.” The facility reported no incidents of retaliation in the last 12 months on the PAQ.

Documentation Review – Retaliation monitoring was conducted and documented in all eleven investigations reviewed. Retaliation monitoring was documented in the six sexual abuse investigations for up to 90 days. There was one retaliation monitoring meeting documented in the five sexual harassment investigation. The Assessment/Retaliation Status Checklist form documented the factors that were monitored and if the inmate reported any concerns.

Retaliation Monitoring Staff Interview – The staff that monitors retaliation said she conducts monitoring for 90 days. She reviews inmate conduct, program assignments, housing assignment changes, and work assignment changes. If she suspects retaliation, she immediately reports the retaliation to her supervisor, the PREA Site Coordinator and the facility investigator. She can continue monitoring beyond 90 days if needed due to individual circumstances.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Monitoring shall include face-to-face status checks.”

Retaliation Monitoring Staff Interview - The staff that conducts monitoring said she meets with the victim every 30 days.

Documentation Review – Retaliation monitoring was conducted in all eleven investigations reviewed. In the six sexual abuse investigations, retaliation monitoring was conducted with an initial meeting and periodic meetings every 30 days for up to

	<p>90 days. One monitoring ended prior to 90 days when the inmate was released.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Reporters and witnesses shall be monitored for retaliation at the minimum of one time utilizing the assessment-retaliation status checklist form. If no retaliation is reported, monitoring will cease.” This requirement of the policy should include inmate reporters. Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims.</p> <p>CORRECTIVE ACTION REQUIRED: Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims. Provide the policy change and documentation of the change in policy and practice being communicated to all PREA Site Coordinators.</p> <p>Corrective Action Completed: The Agency has updated policy D1-8.13 Offender Sexual Abuse and Harassment to now include third-party inmate reporters in face-to-face monitoring meetings for 90 days, aligning with the existing monitoring requirements for inmate victims. Staff who report sexual abuse will undergo 90 days of monitoring and receive a flyer detailing how to report any retaliation to the Warden, PREA Hotline, CLEAR line, PREA Email, or the Office of Professional Standards email. Offenders or staff who cooperate in a sexual abuse investigation as witnesses and express concerns about retaliation will be evaluated and protected from retaliation. This policy revision and its implementation were communicated to the PREA site Coordinators (PCM) by the PREA Unit Manager (PREA Coordinator) on August 23, 2024, via email.</p>
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115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Following an allegation of offender sexual abuse or if an offender is assessed as being at high risk of victimization, the shift supervisor shall ensure the offender is housed in the least restrictive housing available to ensure safety. When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk.</p>

	<p>The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.” MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30-day review.</p> <p>The facility reported zero inmates were placed in administrative segregation involuntarily after reporting sexual abuse during the reporting period. There were no inmates in segregation involuntarily at the time of the onsite audit for reporting sexual abuse.</p> <p>Warden Interview – The Warden said if an inmate who reports sexual abuse is found to be not safe in open population housing, he could be placed in administrative segregation until a safe housing alternative can be found. A transfer would be pursued if there was no safe alternative.</p> <p>Staff that Supervise Segregation – A Unit Manager said he has not had an inmate involuntarily placed in segregation after reporting sexual abuse. He said the inmate confinement record documents the reason for placement in segregation as the only alternative and the restrictions to privileges, work and programs.</p> <p>The facility meets the standard based on the interviews and policies reviewed.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she is immediately contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Facility Investigator – The Facility Investigator said he investigates only sexual harassment allegations. Any allegation that is unclear what type of incident it is, he will do an initial review to determine the type of incident. He said it takes one or two working days to initiate an investigation for a sexual harassment allegation.</p> <p>Investigation File Review – There were six sexual abuse investigations in the last 12 months. The investigations were prompt starting, thoroughly documented and objective in the review of all evidence.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states</p>

"Investigators shall receive specialized PREA investigation training prior to conducting an investigation involving offender sexual abuse." The PREA Unit Investigators conduct all of the sexual abuse investigations

PREA Unit Investigator – The PREA Unit Investigator said she has completed the NIC Sexual Abuse Investigations in a Confinement Setting, the NIC Advanced Sexual Abuse Investigations training and training by VAWA online.

Document Review – NIC training certificates were provided for 12 investigators in the PREA Unit.

c) PREA Unit Investigator Interview – The PREA Unit Investigator said she receives a Request For Investigation from the facility and the PREA Notification Checklist when there is a clear sexual abuse allegation. The PREA Unit Investigators conduct the administrative and criminal investigations for sexual abuse. She reviews the initial information, reviews video evidence if available, conducts a background investigation of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident. The facility will assist by protecting the scene and the SANE staff collecting evidence through a forensic examination.

d) PREA Unit Investigator Interview – The PREA Unit Investigator said they do not conduct compelled interviews. If a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it certified mail to document the referral.

e) PREA Unit Investigator Interview – The PREA Unit Investigator said she is not allowed to subject the victim to a truth telling device. The subject of the investigation could be asked to complete a voice stress analysis. She determines the subject's credibility on a case-by-case basis from the background review of prior criminal history, PREA investigations and conduct.

Facility Investigator – The Facility Investigator said he would not use a truth telling device on the victim as a condition of continuing an investigation. He has not used a Voice Stress Analysis in a sexual harassment investigation.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Administrative investigations shall include an effort to determine whether staff member actions or failure to act contributed to the abuse."

PREA Unit Investigator – The PREA Unit Investigator said she reviews staff actions in relation to the coordinated response plan, policies and procedures.

g-h) Investigation File Review – there were no criminal investigations conducted during the review period. All investigations reviewed were administrative investigations. The four that were substantiated did not have a clear criminal violation or did not meet the probable cause standard for a criminal referral.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Inquiries regarding offender sexual abuse and harassment and all supporting

	<p>documents shall be retained as long as the alleged perpetrator is incarcerated or employed with the department, plus 5 years and in accordance with the department procedure regarding records retention.”</p> <p>j) Prea Unit Investigator – The investigator said when a staff that is the subject of an investigation leaves employment prior to interview, she will obtain contact information from human resources and call to request the staff come back to the facility for an interview or interview them on the phone. If they refuse to answer, she will make several attempts before moving on with the investigation.</p> <p>Investigation File Review – There were three substantiated staff sexual misconduct administrative investigations reviewed. The staff were interviewed in all three and then resigned after the interview. The investigation was completed in all three despite the staff resignations. In one substantiated inmate sexual abuse investigation, both the inmate victim and inmate perpetrator were released prior to being interviewed. The investigator made several attempts to contact them, but neither could be interviewed. The investigation was completed based on all available evidence.</p> <p>The facility meets this standard based on the information from interviews, policies and investigations reviewed.</p>
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.”</p> <p>Facility Investigator Interview – The Facility Investigator said he uses the evidence standard of preponderance of evidence for administrative investigations he conducts for sexual harassment. He said that means it is more likely than not that the allegation happened as reported.</p> <p>PREA Unit Investigator Interview - The PREA Unit Investigator said she uses the preponderance of evidence standard for the administrative investigations of sexual abuse. More than 50% of the evidence supports substantiated.</p> <p>Investigation Review – All eleven investigations were an administrative investigation. Four investigations were substantiated based on the preponderance of evidence standard.</p> <p>The facility meets this standard based on the information from interviews, policies and investigations reviewed.</p>

115.73	Reporting to inmates
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1477 589">a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Upon the completion of an offender sexual abuse investigation, the department's PREA unit shall make written notification to the alleged victim regarding the outcome of the investigation utilizing the applicable PREA alleged sexual abuse by offender notification form or the PREA alleged sexual abuse by staff member notification form."</p> <p data-bbox="256 622 1398 701">Warden Interview – The Warden said a written notice of investigation outcome is provided to inmates for sexual abuse investigations for all outcomes.</p> <p data-bbox="256 734 1433 902">PREA Unit Investigator Interview – the PREA Unit Investigator said she provides the written notification to the facility PREA Site Coordinator (PCM). The PREA Site Coordinator provides the written notification to the inmate. There is a form for sexual abuse by an offender and by staff.</p> <p data-bbox="256 936 1473 1104">Document Review – There were six investigations of sexual abuse provided for review that occurred during the review period. Five notifications of outcome were provided to inmates in writing. One inmate victim was released prior to the conclusion of the investigation and was not required to be provided a written notification.</p> <p data-bbox="256 1137 1477 1462">c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All subsequent notifications shall be made when: Staff member on offender allegations: following the completion of the investigation, the offender shall be notified when the following occurs (unless the investigation is unfounded); The staff member perpetrator is no longer assigned to the housing unit; The staff member perpetrator is no longer employed by the department; The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution; A disposition of charges exists related to sexual abuse within the institution."</p> <p data-bbox="256 1496 1477 1709">Investigation File Review – There were four sexual abuse investigations involving staff. The inmate victims in all four were provided a PREA Alleged Sexual Abuse by Staff Member Notification form. Three investigations were substantiated and notified the inmate the staff no longer worked at the facility. One investigation was unfounded and only notified the inmate of the outcome.</p> <p data-bbox="256 1742 1477 1944">d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offender on offender allegations: following the completion of an investigation, the offender shall be notified when the following occurs: (1) The offender has been indicted on a charge related to sexual abuse within the institution. (2) A disposition of charges exists related to sexual abuse within the institution."</p> <p data-bbox="256 1977 1441 2101">Investigation File Review – Two sexual abuse investigations involved inmate perpetrators. A PREA Alleged Sexual Abuse by Offender Notification form was provided to the inmate victim in one investigation. The inmate victim was released</p>

	<p>prior to the completion of the second investigation involving an inmate perpetrator.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA unit shall forward the written notification to the offender via the PREA site coordinator. The PREA site coordinator shall ensure that the written notification is provided to the offender in a confidential manner.”</p> <p>Document Review – There were six investigations of sexual abuse provided for review that occurred during the review period. Five notifications of outcome were provided to inmates in writing. One inmate victim was released prior to the conclusion of the investigation and was not required to be provided a written notification.</p> <p>The facility meets this standard based on the information from interviews, policies and investigations reviewed.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures.” The policy follows this provision.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Termination from the department shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse.” The policy follows this provision. The facility reported four staff terminations on the PAQ, but there were three staff terminations documented in investigations during the audit review period.</p> <p>c) The facility reported on the PAQ no staff were disciplined short of termination for sexual harassment or sexual abuse during the review period.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All terminations for violations or the resignation of a staff member, who would have been terminated if not for their resignation, shall be reported to relevant licensing or accreditation bodies and law enforcement.” The policy follows this provision.</p> <p>Document Review – The three staff that were terminated for a substantiated sexual abuse did not have a professional license. None of the staff investigation documented behavior that would be a violation of criminal code and was not referred to law enforcement or prosecutors.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies and law enforcement.” The policy reflects the provisions of the standard.</p> <p>Warden Interview – The Warden said if a contract staff or volunteer had an allegation of sexual abuse, they would be removed from the facility until the investigation is resolved. If the investigation is substantiated, there would be a permanent restriction from entry for that contractor. A substantiated sexual harassment would be reviewed on a case-by-case basis to determine if removal is appropriate.</p> <p>Document Review – There were no contract staff or volunteer found to be involved in an investigation of sexual abuse or sexual harassment from the investigation file review. The facility reported on the PAQ that no contract staff or volunteers were reported to law enforcement or relevant licensing bodies during the review period.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders shall be subject to corrective actions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender-on-offender sexual abuse in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard. The facility reported on the PAQ no criminal findings of inmate-on-inmate sexual abuse during the review period.</p> <p>Investigation File Review – One administrative investigation of inmate sexual abuse was substantiated. The incident was abusive sexual contact and was not referred for prosecution. Both the victim and perpetrator were released prior to the investigation being completed.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender’s disciplinary history, and the sanctions imposed for</p>

	<p>comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>Warden Interview – The Warden said the inmate disciplinary process requires sanctions to be based on the circumstances of the violation, discipline history and progressive.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The corrective action process shall consider whether an offender’s mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, shall be imposed in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>Warden Interview – The Warden said when considering sanctions for inmate discipline, an inmate’s cognitive disabilities and mental health can be used as mitigating factors in sanctioning for sexual abuse and sexual harassment conduct violations.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If found guilty of sexual abuse, the PREA site coordinator or designee shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse.”</p> <p>Medical Staff Interview – Inmate perpetrators will be offered mental health counseling within 60 days of the investigation being substantiated. Counseling is not mandated as a condition of program participation.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact.”</p> <p>f) Missouri DOC policy IS19-1.6 Offender Accountability Program states “a report of sexual misconduct, made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying.” The policy reflects this provision of the standard.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department prohibits all sexual activity between offenders. Consensual sexual activity between offenders shall not be deemed sexual abuse and shall be addressed in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has experienced prior sexual victimization, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening.”</p> <p>Risk Screening Staff Interview – The staff that conducts risk screening said he offers mental health services to inmates who report being a prior victim of sexual abuse. If the inmate wants to see mental health staff for services, he will complete a referral form and email it to mental health staff.</p> <p>Mental Health Staff Interview – Mental Health staff said she receives referrals for mental health services for inmates who report being prior victims of sexual abuse.</p> <p>Inmate Interviews – inmates that reported being a prior victim of sexual abuse said they were offered a referral to mental health. All of them said they declined the offer.</p> <p>Document Review – Ten inmates reported being a prior victim of sexual abuse. All ten were offered mental health services and declined those services. This was documented on the risk screening.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has previously perpetrated sexual abuse, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a mental health practitioner within 14 calendar days of the intake screening.”</p> <p>Document Review – Risk assessments were reviewed for forty inmates. Two were prior perpetrators of sexual abuse by having a prior sex offense conviction. Both were offered a referral for mental health services. Both declined the offer.</p> <p>d) Risk Screening Staff Interview - Staff that conduct the risk assessment said the information they gather from inmate interviews and the inmate record to complete the risk assessment is confidential and strictly limited to staff involved in the risk assessment process and review. The risk assessment is completed in an electronic system called MOSIS that staff must be granted access to.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting.”</p> <p>Medical Staff Interview – medical staff said they cannot share information reported by an inmate about prior sexual abuse that occurred in the community with facility investigation staff without a signed informed consent from the inmate.</p>

	<p>Mental Health Staff Interview – The Mental Health staff said inmates are informed of mental health staff duty to report in writing prior to a therapy meeting. If an inmate provides information about an incident of sexual abuse at an institution to mental health staff, the staff must report it to the facility investigator.</p> <p>The facility meets the provisions of this standard based on interviews, documents and policies reviewed.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional judgment.”</p> <p>Medical Staff Interview – Medical staff said inmates who are victims of sexual abuse would be assessed and treated for emergent injuries and instructed not to destroy evidence until a forensic examination can be conducted. The forensic exam can be conducted by the SANE staff from FRDC or another MODOC facility. If no MODOC SANE’s are available, the inmate can be taken to a local hospital with a forensic exam department.</p> <p>b) Staff Interviews – All staff said they would protect the victim until the shift supervisor could arrange for additional staff to take the victim to medical or they were instructed to take the victim to medical. The Shift Commander would notify medical about the sexual abuse report. If medical staff were temporarily unavailable, custody staff would wait with the victim until they could be seen by medical.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections by the MODOC SANE staff or by the hospital SANE.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p>

	The facility meets the provisions of the standard based on information from interviews and policies reviewed.
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each victim and abuser shall be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals shall be completed for continued care following their transfer to, or placement in, other facilities or their release from custody.”</p> <p>Medical Staff Interview – Medical staff said inmate victims of sexual abuse would be provided follow up treatment on injuries and medication management for STI care.</p> <p>Mental Health Staff Interview – Mental health staff said victims of sexual abuse would be offered treatment services based on trauma informed care.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims and abusers shall be provided with medical and mental health services consistent with the community level of care.”</p> <p>Mental Health Staff Interview – Mental health staff said the victim would be provided mental health services similar to services offered in the community.</p> <p>Medical Staff Interview – The medical staff said the medical services provided are consistent to the services offered in the community.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections. If the inmate goes to a local hospital, the SANE there would conduct the testing and FRDC medical staff would follow up on the medication.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any</p>

	<p>investigation arising out of the incident.”</p> <p>h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse.”</p> <p>Mental Health Staff Interview – Mental health staff said therapies that focus on triggers for abusive behavior would be provided to the inmate perpetrators.</p> <p>The facility meets the provisions of this standard based on information from interviews and policies reviewed.</p>
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115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.</p> <p>Document Review – The facility reported on the PAQ that there were 15 sexual abuse investigations during the review period. Eleven completed administrative investigations were provided for review from the review period. There were no criminal investigations during the review period. Six of the eleven were investigations of sexual abuse with four substantiated, one unsubstantiated and one unfounded. Five incident reviews were documented on a PREA Sexual Abuse Incident Debriefing form. One investigation for sexual abuse was unfounded and a review was not completed for the incident.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.</p> <p>Document Review – Five completed PREA Sexual Abuse Incident Debriefing forms were provided with the investigation files for review. The PREA Sexual Abuse Incident Debriefing forms document the incident review. All five sexual abuse incident reviews were completed within 30 days of the investigation conclusion.</p>

	<p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The review team for offender sexual abuse events shall include the PREA site coordinator, and other upper-level administrators, when applicable, with input from the shift supervisor, investigators, and medical or mental health practitioners.” The policy reflects this provision of the standard.</p> <p>Warden Interview – The Warden said the incident debriefing team consisted of the Deputy Warden (PCM), Investigator, medical staff, mental health staff, and first responder for the incident.</p> <p>Document Review – Five PREA Sexual Abuse Incident Debriefing forms documented the members of the review team. The Deputy Warden, Health Services Administrator, Mental Health Director, first responder and Investigator participated in all reviews. The first responder is usually a Sergeant or a Lieutenant.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA sexual abuse incident debriefing report shall be completed by the PREA site coordinator outlining in detail the findings of the incident debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse incident debriefing form.” The form requires the review team to answer questions for the five factors in this standard.</p> <p>Warden Interview – The Wardens said the debriefing team looks at the response of staff to the report; barriers or blind spots where the incident occurred; factors that may have contributed to the incident, such as sexual orientation or gender identity of the victim, the victim’s charges, gang affiliation of an inmate subject, or race; staffing levels; and video camera deployment.</p> <p>PREA Compliance Manager and Incident Review – An Assistant Warden is designated as the PREA Site Coordinator or PCM for FRDC. He said he schedules the reviews when needed. The team can consist of the DW, medical staff, mental health staff, Investigator and first responder involved with the incident. He documents the review on the form and provides a copy to the Warden and PREA Coordinator. All evidence is reviewed including written statements by the victim, witnesses, investigator interview notes, and watching video if available. If corrective actions are identified, they are documented on the form and coordinated with the Warden for completion or documented why it cannot be completed.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The facility shall implement the recommendations for improvement, or shall document its reasons why recommendations shall not be implemented.” The policy reflects this provision of the standard.</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Annual Site Report: Each facility shall utilize information from the offender sexual abuse incident debriefings to prepare an annual report to be submitted to the department’s PREA manager by the last working day in March.” The policy provides the definitions for sexual abuse and sexual harassment in section II. The definitions are equal to the definitions in the PREA standards.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions.”</p> <p>Document Review – The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>c) Missouri DOC Annual Report – The 2022 and 2021 MODOC PREA Annual Reports were reviewed. The reports provided a table of data broken down by incident type and outcomes. This data can be used to complete the Survey of Sexual Victimization summary report.</p> <p>d) PREA Coordinator Interview – The PREA Coordinator said all information and data from incidents of sexual abuse and sexual harassment are retained in the Investigative Reporting Intelligence System.</p> <p>f) PREA Coordinator Interview – The PREA Coordinator said he uses the data and incident information for substantiated investigations from the Investigative Reporting Intelligence System to complete the Survey of Sexual Victimization when it is requested.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions. a. The report shall include: (1) a comparison with prior year's data, (2) corrective actions, and (3) an assessment of</p>

	<p>the department's progress in addressing offender sexual abuse.”</p> <p>2021 & 2022 PREA Annual Report – The PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>Agency Head – The Division Director said incident data is used to assess and improve housing assignments, video monitoring and staffing levels. Additional training is provided to staff through PREA Unit staff speaking at basic training courses.</p> <p>PREA Coordinator – The PREA Coordinator said the annual report compares data since 2013 and summarizes ongoing corrective actions.</p>
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115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>PREA Coordinator – The PREA Coordinator said the PREA incident information is securely stored in the Investigative Reporting Intelligence System (IRIS). Access to IRIS is limited to investigators, PREA Site Coordinators, Warden’s and other staff directly involved in incident investigation and review.</p> <p>Missouri DOC Annual PREA Report - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The last two years of PREA Annual Reports were reviewed and found to have a comparison of sexual abuse data from 2013 to 2022. The reports did not contain any personal identifiers.</p> <p>The facility and agency meet this standard based on the information from the PREA Coordinator interview and review of annual reports found on the MODOC PREA webpage.</p>

115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. Fulton Reception Diagnostic Center was audited three years ago. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all of their facilities during all audit cycles.</p>

	<p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with inmates in a private room with a window for observation by staff.</p> <p>A notice of audit was posted throughout the facility six weeks prior to the onsite audit notifying inmates they could send confidential correspondence to this auditor. Photos were sent the day the notices were posted as verification of the posting. No letters were received prior to the onsite audit from inmates.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Missouri DOC has a PREA webpage at https://doc.mo.gov/programs/PREA that contains the PREA Final Audit reports from 2014 to 2023.

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	no
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b) Policies to ensure referrals of allegations for investigations		
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c) Policies to ensure referrals of allegations for investigations		
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a) Employee training		
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	na
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a) Use of screening information		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b) Use of screening information		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c) Use of screening information		
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)	
	<div data-bbox="320 185 1273 555"> <p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div>

PREA Facility Audit Report: Final

Name of Facility: Ozark Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 04/26/2024

Date Final Report Submitted: 10/02/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 10/02/2024

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	02/27/2024
End Date of On-Site Audit:	02/29/2024

FACILITY INFORMATION	
Facility name:	Ozark Correctional Center
Facility physical address:	929 Honor Camp Lane, Fordland, Missouri - 65652
Facility mailing address:	

Primary Contact

Name:	
Email Address:	
Telephone Number:	

Warden/Jail Administrator/Sheriff/Director	
Name:	Michael Shewmaker
Email Address:	Michael.Shewmaker@doc.mo.gov
Telephone Number:	417-767-4491 ext 224

Facility PREA Compliance Manager	
Name:	Heather Belfield
Email Address:	heather.belfield@doc.mo.gov
Telephone Number:	O: 417-767-4491

Facility Health Service Administrator On-site	
Name:	Gary Jarvis
Email Address:	gjarvis@TeamCenturion.com
Telephone Number:	417-767-4491 ext 227

Facility Characteristics	
Designed facility capacity:	738
Current population of facility:	628
Average daily population for the past 12 months:	577
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males

Age range of population:	21-76 years old
Facility security levels/inmate custody levels:	Minimum Treatment profiles
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	252
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	54
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	55

AGENCY INFORMATION

Name of agency:	Missouri Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2729 Plaza Drive, Jefferson City, Missouri - 65109
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102
Telephone number:	5737512389

Agency Chief Executive Officer Information:

Name:	Trevor Foley
Email Address:	Trevor.Foley@doc.mo.gov
Telephone Number:	573-526-6607

Agency-Wide PREA Coordinator Information

Name:	Darren Snellen	Email Address:	darren.snellen@doc.mo.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-02-27
2. End date of the onsite portion of the audit:	2024-02-29

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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AUDITED FACILITY INFORMATION

14. Designated facility capacity:	738
15. Average daily population for the past 12 months:	577
16. Number of inmate/resident/detainee housing units:	3
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	626
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	6
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	3
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	8
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	11

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	1
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	2
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	36
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	252
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	55

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	54
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	15
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<div> <input type="checkbox"/> Age </div> <div> <input type="checkbox"/> Race </div> <div> <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmates were randomly chosen for interviews by dividing the total population by the desired number of interviewees, resulting in the number forty-two. The inmate at the forty-second position on the housing list was then selected, amounting to a total of fifteen inmates. Demographic information was not provided on the inmate list.

56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	16
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1

62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	None of the inmates interviewed reported being blind or low vision. The case management staff reported no blind or low vision inmates from the intake process that were currently at the facility.
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	3
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	<p>None of the inmates interviewed were found to be limited English proficient. The case management staff reported no LEP inmates being identified from the intake process that were currently at the facility.</p>
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	<p>1</p>
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	<p>1</p>
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	<p>0</p>
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	<p>None of the inmate victims from sexual abuse investigations were on the inmate roster.</p>

68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	7
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The staff working in the segregation unit were asked if any of the current inmates had been involuntarily placed in segregation after reporting sexual abuse. The staff said there were no inmates in the unit due to a PREA report.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Ten Security staff were selected form the shift roster on the first day of the onsite audit. Two non-security staff were interviewed that were working the first day of the audit.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	16
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No

78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☒ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☒ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☒ First responders, both security and non-security staff
- ☒ Intake staff

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Qualified Victim Advocate Staff
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.
SITE REVIEW AND DOCUMENTATION SAMPLING	
Site Review	
<p> PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information. </p>	
84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input type="radio"/> Yes <input checked="" type="radio"/> No

a. Explain which critical functions you were unable to test per the site review component of the audit instrument and why:	<p>Intake was going to be observed on the second day of the audit. The staff conducting the intake were not told and came in early completing the intake prior to the auditor arriving at the facility. The PREA Site Coordinator was not aware the staff were coming in early. There is no outside victim advocate organization that provides services to SCCC to contact.</p>
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
88. Informal conversations with staff during the site review (encouraged, not required)?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	<p>An inmate was asked to make a test phone call to the PREA hotline.</p>
Documentation Sampling	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	<p>No text provided.</p>

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	2	0	2	0
Staff-on-inmate sexual abuse	5	0	5	0
Total	7	0	7	0

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	1	0	0	1
Staff-on-inmate sexual abuse	1	0	1	3
Total	2	0	1	4

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

7

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	7
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	6
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	There were no completed sexual harassment investigations during the review period per the facility.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- ☒ The audited facility or its parent agency
- ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- ☐ A third-party auditing entity (e.g., accreditation body, consulting firm)
- ☐ Other

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment is the policy that provides the zero-tolerance policy, definitions of sexual abuse and sexual harassment, and the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>b) Based on the organization charts provided, the Missouri Department of Corrections has a PREA Coordinator in the Office of Professional Standards that reports to the Director of that division. The Director of OPS then reports to the MoDOC Director.</p> <p>PREA Coordinator Interview – The PREA Coordinator said he has sufficient time and authority to fulfill the duties of the PREA Coordinator for the agency. He oversees the PREA Unit that consists of dedicated investigators and support staff that assist him in managing and monitoring PREA standards compliance and PREA investigation at all facilities in the agency. Each facility has a PREA Compliance Manager that reports to him for PREA Compliance matters.</p>

	<p>c) Document Review - The organizational chart was provided for OCC. The PREA Site Coordinator (PREA Compliance Manager) is a Deputy Warden that reports directly to the Warden.</p> <p>PCM Interview - The Deputy Warden said she has the time and authority to complete the requirements of being the PREA Compliance Manager for OCC. She is responsible for monitoring PREA compliance in addition to her other duties as the Deputy Warden of Offender Management.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>It was reported on the PAQ that the Missouri Department of Corrections currently does not contract for the confinement of inmates with a private or other governmental agency. The PREA Coordinator stated in his interview the Missouri DOC is not contracting with anyone for confinement of inmates at this time. A memorandum was provided by the PCM that states the Ozark Correctional Center does not contract for the confinement of inmates.</p>

115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires each facility to “maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse.” “The staffing plan shall consider the facility’s physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.”</p> <p>Document Review - The facility provided a 2022 staffing plan analysis from an external vendor that consisted of an email about the scheduled analysis, a page from the Missouri DOC Custody Staffing Analysis Manual, A Master Post Listing 2021 for OCC, Shift rosters for second shift, and a blank shift log. Though the documents provided did have a master post listing showing custody posts with relief factor, it did not account for non-custody staff positions that are part of the staffing in the facility</p>

or the deployment of video monitoring technology. The staffing plan does not appear to consider the 11 factors in the standard in the staffing plan.

Tour Observations - Cameras were observed in the hallway of every wing of the housing units. Inmates were in rooms that were off camera and monitored by staff rounds. Housing unit bathrooms were on each wing with an open entry to the hallway. Showers could be seen from the entry, but were appropriately covered by shower curtains that were clear on the top and bottom with a solid middle section. Toilets are in stalls that were covered by shower curtains that had a solid panel covering the toilet but not completely blocking the view in the stall. Some curtains were hung too high causing the solid panel to be above the toilet seat possibly exposing the inmate sitting on the toilet. The facility had the curtains lowered and provided pictures documenting the correction. The inmate bathroom in the kitchen had a solid door and remained open for inmate access. The staff to inmate ratio in the kitchen could make it hard to monitor single inmate access to that bathroom. The facility was directed to either lock the door and control access or put a window in the door with a partition inside. The facility chose to install a lock on the door that foodservice staff would control. Pictures were provided for documentation of the correction. Cameras were observed in most areas of the facility. Staff were observed in the housing units making rounds. Staff were posted at the entrance to the education building controlling access. Cameras covered all hallways in the education building. Classrooms had windows that allowed security staff to easily observe inmates and teachers in the rooms. The mental health area was in housing unit 2. There were cameras in the dayroom area in front of the mental health offices. All offices had windows to aid security staff in monitoring staff and inmates in the office if the door was shut during sessions. Cameras were covering each aisle of the warehouse eliminating potential blind spots. The chapel was one room with cameras in each corner. There were no other blind spots observed in the facility.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall comply with the staffing plan on a regular basis, deviations from the staffing plan shall be documented and justification for deviations noted." The facility reported no deviations from the staffing plan in the last 12 months on the PAQ.

Warden Interview - The Warden said the executive team monitors the staffing levels and works with HR to fill vacancies. OCC has a low vacancy rate for a facility that is in an isolated part of the state. He said OCC does not have deviations from the staffing plan. Overtime is used to fill a post when there are staff absences due to call offs. He has shifted some of the shift supervisors to provide better supervision of staff since he arrived a month ago. OCC has not made additions or improvements to the video monitoring system during the review period.

PCM Interview - The PREA Site Coordinator said she meets with the Warden and HR for the annual review. However, staffing is reviewed throughout the year. Vacancies are monitored on a regular basis to ensure they are being filled. Deviations from the staffing plan have not occurred in the last year. Deviations would be closing mandatory security posts and implementing emergency procedures. Overtime is utilized to cover a post due to a vacancy.

c) Document Review – The 2022 Facility Annual PREA Report was provided for review. The report has a section that documents a staffing plan evaluation was completed on January 5, 2022. The evaluation was completed by the Warden, PREA Site Coordinator, Deputy Warden, and the Chief of Custody. The report states a staffing analysis was completed in 2021 that recommended the addition of custody supervisors and ten additional staff. These additional staff have not been approved for hire but are expected to occur in the near future. The report also documented an evaluation of camera and monitoring systems that says OCC will receive a new camera system with a capacity for additional viewing time. The evaluation concluded that the current system meets PREA standards. Though the annual report discusses the evaluation of staffing and video monitoring, it does not clearly document a review of a documented staffing plan as required by provision (a) of the standard. A review of a documented staffing plan must be provided.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each institution shall ensure the classifications of lieutenant or above conduct and document unscheduled and unannounced rounds to identify and deter offender sexual abuse and sexual harassment. Each facility shall ensure that rounds occur periodically in all areas of the facility. Staff members shall be prohibited from alerting other staff members that these rounds are occurring. The rounds shall be documented and readily accessible during audits as outlined in the facility's standard operating procedure.” The policy reflects the requirements for this provision of the standard.

Document Review – Housing unit logs were requested for two randomly selected dates in December 2023, January and February 2024. Unannounced security rounds were documented on all shifts by intermediate level supervisors. Sergeants, Lieutenants and Captains were documented conducting USC's at least once on each shift for the dates requested.

Intermediate Staff Interview – A Lieutenant and Captain were asked questions about unannounced rounds. Both said they visit a housing unit at least once each day. The unannounced round is documented in the housing unit log and shift reports. The Captain said staff would be disciplined if they are caught warning other staff he is conducting unannounced rounds. The Lieutenant said staff do not know which housing unit will be visited and policy prohibits staff from warning others that rounds are being conducted.

Inmate Interviews – All inmates were asked if they see correctional officers and supervisors making rounds on a regular basis in the housing units. All inmates reported seeing CO's making rounds on the wings a few times each hour. They also see a sergeant, lieutenant or captain at least once each day visiting the housing unit.

Random Staff Interview – staff reported seeing supervisors making rounds in the housing unit at least once per shift every day. Sergeants are there every shift. A captain or lieutenant are making rounds in the housing units several times per week.

CORRECTIVE ACTION REQUIRED: The documents provided for the staffing plan do not

	<p>cover all staffing in the facility and staffing on all shifts. Though the annual report discusses the evaluation of staffing and video monitoring, it does not clearly document a review of a documented staffing plan as required by provision (a) of the standard. A review of a documented staffing plan must be provided.</p> <p>Corrective Action Completed: A staffing plan was documented in a Master Post Listing, CO I Staffing Dashboard Report, Facility Organizational Chart, Master Post Listing 2023 and an Institutional Staff Roster. The review of the staffing plan was completed and documented in a Facility Staffing Plan Review document that was completed by the PREA Site Coordinator (PCM) and sent to the PREA Unit Manager (PREA Coordinator) for MODOC for review. The review covered thirteen factors that are required in substandard (a) and (c). the review was signed by the Major, PREA Site Coordinator and Warden.</p>
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115.14	Youthful inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “A youthful offender will not be placed in a housing unit in which he will have sight, sound, or physical contact with any adult offender through use of a shared day room or other common space, shower area, or sleeping quarters in accordance with the institutional services procedure regarding offender housing assignments.”</p> <p>A memorandum from the PCM was provided that states Ozark Correctional Center does not house youthful inmates. It was reported on the PAQ that OCC does not house youthful inmates. None of the inmates interviewed were under 18 years of age. The PREA Coordinator said the MODOC sends all male youthful offenders to Farmington Correctional Center.</p>

115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri Department of Corrections policy IS20-1.3 Searches prohibits cross gender strip searches except in exigent circumstances. Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment also prohibits cross-gender strip searches except in exigent circumstances. The facility reported on the PAQ that no cross gender strip searches occurred in in the past 12 months. The policies reflect the requirements of the provision of this standard.</p>

Document Review -The PCM provided a memorandum on the PAQ that says OCC has not had a cross gender strip or cross gender visual body cavity search during the review period. If there were a cross gender strip search under exigent circumstances, it would be documented on a form 931-4701.

c) Missouri DOC policy IS20-1.3 Searches requires staff to document all cross gender strip searches on the cross gender search form. There were no cross gender strip search forms presented for review. The policy reflects the requirements for this provision of the standard.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with, institutional services, and probation and parole procedures regarding searches." The policy also requires staff of the opposite gender to announce their presence prior to entering a housing unit. These announcements are to be logged in the housing unit chronological log. Post orders for each housing unit were provided for review. The post orders required a mandated PREA announcement to be made and documented in the housing unit log when opposite gender staff begins work in a housing unit or enters when there are no opposite gender staff in the unit. The policy and post orders reflects the requirements for this provision of the standard.

Tour Observations - During the facility tour, the bathrooms were observed in two open population housing units. Individual shower stall were appropriately covered by shower curtains with a clear top and solid middle with a gap from the floor to knee high. There were also moveable partitions that were placed in front of the showers that covered from the shoulders down that stood in front of the shower stalls. The curtains and partitions afforded privacy without creating a blind spot for staff monitoring. The toilets had stall walls that separate them with shower curtains hanging at the stall entrance. The curtains were clear on top and solid in the middle with a gap from the floor to knee high. Some were hung too high, placing the solid screen higher than the toilet seat. This could expose the view of an inmate's genitals from a distance. The curtains were re-hung with the solid screen lowered to below the toilet height to block the view of inmate's using the toilet without creating a blind spot. Single use inmate bathrooms were observed in the Chapel, Foodservice, Maintenance, and program areas. There were no cross gender viewing issues with these bathrooms. Opposite gender staff announcements were observed during the tour. Opposite gender staff announcements were documented in housing unit logs as "PREA Announcements." Signs indicating female staff are on the unit are hung up for hearing impaired inmates.

Random Staff Interviews - Twelve staff were selected at random from shift rosters for interviews. All staff said they felt like the inmates could shower and use toilet facilities with enough privacy that staff could not see their genitals or buttocks. All staff were aware of and hear opposite gender staff make announcements when entering housing units.

	<p>Document Review – Housing unit logs were requested for random dates in December 2023, January and February 2024. PREA announcements were found when female staff entered housing units or took over a shift in a housing unit.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not perform strip or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, diagnostic center reception and orientation, and receiving screening intake center.” Missouri DOC policy IS20-1.3 Searches prohibits staff from performing a strip search for the sole purpose of determining an inmate’s gender. The policies reflect the requirements of the provision of this standard. There were</p> <p>Random Staff Interviews – All staff said they strip searching a transgender inmate solely for determining their genital status was prohibited by policy, not allowed and would be unprofessional.</p> <p>Inmate Interview – One inmate that identifies as transgender said she had not been strip searched only to determine genital status since being at the facility.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Custody staff members shall be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs.” The policy reflects the requirements for this provision of the standard.</p> <p>Random Staff Interviews – The staff randomly selected for interview said they had been trained how to do cross gender searches and searches of transgender inmates. Female staff said they have done cross gender pat searches of inmates at OCC. The search described for transgender inmates was similar to the search of a female inmate.</p> <p>Inmate Interviews – Some inmates said they have been pat searched by female staff. They felt the search was appropriate and professional. None said they had been subjected to a cross gender strip search. A transgender inmate said pat searches by staff were not intrusive and appropriate.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires staff to “provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” LEP inmates will be provided the PREA video transcript and PREA brochure in their native language. If these cannot be translated into their native language, the PREA site coordinator will utilize an interpreter to assist the inmate in understanding the material. “Offender interpreters shall not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.” The facility reported not having inmates that were limited English proficient at the time of the onsite audit. None of the inmates selected for interview were found to be LEP.

Random Staff Interviews – Staff knew that there were facility staff that could be a translator for some languages. Most knew there was a service the shift supervisor could access for interpretive services. All staff said they would never use an inmate as an interpreter for an LEP inmate.

Intake Staff Interview – The staff that provide the PREA education at intake was asked how accommodations for disabled or LEP inmates are made. She said she can provide a large print PREA pamphlet to inmates with visual impairment, provides a video about PREA with closed captioning and a Spanish transcript. She also reads over the information to aid anyone that cannot read or that is blind. When asked about language interpretive services, she was not sure if there was a service available.

Document Review – The facility provided a list of staff designated as interpreters for Spanish, Sign Language, Russian, Ukrainian, and Hungarian. A contract for interpretive services was provided, but had expired in 2018. A large print PREA brochure is available to assist inmates with visual impairment.

Tour Observations – During the tour of the facility, this auditor observed Spanish versions of PREA posters in inmate housing units and program areas.

CORRECTIVE ACTION REQUIRED: The facility provided a contract for interpretive services that had expired. The staff that conduct PREA education were not aware of an interpretive service that could be used to effectively provide LEP inmates the information about sexual abuse and sexual harassment reporting. The facility must provide documentation of an active interpretive services contract and account for the facility that staff can utilize for effective communication with LEP inmates.

Information about the service and the contract must be provided to the shift supervisors and the staff that provide PREA education and risk screening.

Corrective Action Completed: An email was sent to all OCC staff notifying them that interpretive services are available for LEP inmates and the staff they must contact to access the services. A list of staff that can be interpreters and the contract

	for interpretive services was attached to the email. The staff list included One staff that knows sign language, two staff that could speak Spanish and one that speaks Spanish and Hungarian. A current contract for interpretive services was provided by the PREA Coordinator.
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall not hire or promote any person, staff member, or enlist the services of any contractor that may have contact with an offender when it is known that he: a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or c. has been civilly or administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse."</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background screening, candidate selection, maintenance of employee records, employee discipline, and labor organizations."</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Before hiring new staff members a worksite personnel staff member or designee shall: a. perform a criminal background records check; and b. attempt to contact all prior institutional employers, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background screening."</p> <p>Human Resource staff Interview – HR staff said criminal background checks and pre-employment background checks are completed for all new hires and promotions. She reviews prior discipline issues that would include sexual harassment. Issues with sexual harassment history would be considered in hiring and promotion decisions. If applicants have prior corrections experience, a designated staff calls the prior employer for a pre-employment PREA check to inquire about substantiated sexual abuse investigations or resignations during a sexual abuse investigation.</p> <p>Document Review – Records for twelve new hire staff were requested for review for criminal background check completion and pre-employment PREA checks. Criminal</p>

background checks were completed prior to the hire date for eleven of the twelve. One criminal background check could not be provided. A new criminal background check was run again for that employee and provided for review. All staff are asked if they have prior work at a corrections institution. Two staff with prior corrections experience had a documented Pre-employment PREA Check form with a documented inquiry with the prior corrections employer about substantiated sexual abuse investigations or resignations during a sexual abuse investigation that was signed by the staff conducting the check.

d) Missouri DOC policy D2-2.2 Background Investigations states "Contract staff members, volunteers, and student interns shall have a background investigation conducted that consists of the criminal history check and any violations that have been reported to pertinent professional licensing and/or certification organizations if applicable."

Human Resource Staff Interview – HR staff said criminal background checks are conducted for all contract staff prior to working at the facility.

Document Review – Criminal background checks for ten randomly selected contract staff were requested for review. Criminal background checks were completed on six of the ten. The records for four could not be found. A new criminal background check was completed after the onsite audit as a correction.

e) Missouri DOC policy D2-11.14 Annual Employment Requirements Section III. A requires an annual criminal background check to be completed on the birth month of every employee.

Human Resource Staff Interview – HR staff said she requests a criminal background check be completed on staff annually during their birth month. A criminal background check for contract staff is also completed annually during the birth month.

Document Review – Six current staff and seven current contract staff records were reviewed for criminal background checks. One staff and one contract staff record could not be found that had resigned during the audit. New criminal background checks had to be completed for two current staff and three current contract staff due to records not being found. Criminal background checks less than five years old were provided for three current staff and two contract staff.

f) Human Resource Staff Interview – HR staff said new hire staff and staff applying for promotions are asked questions about (a) 1-3 of this standard on applications for employment. Staff are not required to complete a self-evaluation annually and are not asked these questions again. Contract staff are asked the required questions on an Application for Facility Access form or a PREA-Contracted Staff form.

Document Review – The applications for twelve new hire staff were reviewed for the questions pertaining to (a) 1-3. All twelve new hire staff had answered these questions in their application.

	<p>g) Missouri DOC policy D2-2.2 Background Investigations states “False information regarding substantiated allegations of offender or resident abuse and/or harassment on the employment application shall be grounds for termination.”</p> <p>h) Human Resource Staff Interview – HR staff said if another correctional institution contacts the Missouri DOC to inquire about substantiated allegations of sexual abuse or resignations during investigations of a former employee, they will provide information on the substantiated sexual abuse or resignations.</p> <p>CORRECTIVE ACTION REQUIRED: During review of criminal background checks for facility staff and contract staff, nine records could not be located. New criminal background checks were completed after the onsite audit for seven, with two that could not be due to staff leaving. Given the inconsistent records for criminal background checks, the criminal background checks for any newly hired staff or new contract staff shall be reviewed for a 90 day period or until an acceptable sample is collected documenting compliance.</p> <p>Corrective Action Completed: Documentation for seventeen criminal background checks, along with hire dates for staff employed in March, April, May, and June, was submitted for review. Additionally, eight criminal background checks and start dates for newly contracted staff were provided. All background checks were finalized before the respective hire or contract start dates, as mandated by substandard (e) and (d). The corrective action has been completed</p>
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115.18	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) The facility reported on the PAQ no substantial expansion or modification since the last PREA audit.</p> <p>Agency Head Interview – The Director said the agency designs expansion and modifications to maximize the agency’s ability to protect inmates.</p> <p>Warden Interview – The Warden said there have been no expansion or modifications since the last PREA audit. If there are any, improving inmate monitoring based on the requirements of the PREA standards would be considered in the design.</p> <p>b) The facility reported on the PAQ the video monitoring system had a camera installed to monitor the door to the armory during the last year. No other updates to the system have been completed.</p> <p>Agency Head Interview – The Director said when the agency installs or updates video monitoring technology, enhancing the ability to protect inmates is considered by focusing on blind spots.</p>

	<p>Warden Interview – The Warden said OCC has not had any significant expansion, modification of the facility or improvements to the video monitoring system. They are hoping to get a new video monitoring system and will look to improve monitoring for inmate safety.</p> <p>The facility meets this standard based on the information from interviews and documents reviewed.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” The policy also instructs staff to take steps to protect evidence. This may include instructing the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom. If possible, staff should not allow the inmate perpetrator to destroy evidence by preventing showering, changing clothes, eating, drinking, or using the bathroom.</p> <p>Random Staff Interviews – All staff interviewed were asked what their responsibilities are in protecting evidence. All staff said they would ask the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom until evidence can be collected by a SANE at a forensic exam or they are relieved. Staff would ensure the alleged inmate perpetrator would not destroy evidence in the same way. All said they would protect evidence at the scene until it could be collected by investigators.</p> <p>b) MODOC policy D1-8.13 provides a time frame of 72 hours for possible collection of forensic evidence the same as found in the National Protocol for Sexual Assault Medical Forensic Examinations.</p> <p>c) MODOC policy D1-8.13 requires the facility health services staff to contact the on-call SANE staff member if the alleged incident occurred within 72 hours. The policy states “The SANE staff member shall collect evidence according to established forensic procedures for processing and document the exam and finding in the applicable department computer system.” “If the alleged perpetrator is a staff member, the victim shall be transported to the community emergency room for a sexual assault examination to be performed by a SANE or SAFE.” If the alleged perpetrator is an inmate, the shift supervisor shall contact the on call SANE staff member and hold the victim in medical until the SANE staff arrive. The facility reported 4 forensic exams conducted in the past 12 months.</p> <p>SANE Staff Interview – A facility nurse from South Central Correctional Facility was interviewed as a regional SANE for OCC. She is on-call for central and eastern</p>

	<p>MODOC facilities along with four other SANE staff. She is certified as a forensic exam nurse. She said the forensic exam can be conducted from 72 hours up to 96 hours depending on the type of sexual abuse that occurred and if the person washed, showered, changed clothes, went to the bathroom, or had anything to eat or drink.</p> <p>d-e) The MODOC does not have an agreement with a victim advocate organization. Due to the lack of local rape crisis centers in the area of OCC, the facility has staff that have attended victim advocate training provided by the Missouri Coalition Against Domestic Violence to qualify them to provide victim advocate services for inmates at OCC. The certificate for completion of the training was provided for the Chaplain.</p> <p>Victim Advocate Interview – One of the victim advocate qualified staff said he completed a 4 hour online training provided by MCADV. He is notified by the shift supervisor if there is an incident of sexual abuse reported and will report to the facility during off hours. He said the training covered trauma informed care and covered the process of the forensic examination. Conversations with the victim are confidential unless there is information provided that is a safety or security concern. If a victim goes to a local hospital for a forensic exam, a local victim advocate organization from Springfield can be at the hospital if available or he can go if needed. He also provides victim advocate services for the victim during investigator interviews if requested.</p> <p>PCM Interview – The Deputy Warden said the Chaplain was trained as a victim advocate by MCADV. A victim advocate from Webster County can also be at the hospital if they are available or the qualified facility staff can go as well. The facility VA can assist the victim during investigative interviews and forensic examinations conducted at the facility by a staff SANE from SCCC if requested.</p> <p>Document Review – Seven sexual abuse investigations were reviewed for the audit review period. Victim advocate services were documented being offered in six of the seven investigations. The investigation that did not document a victim advocate being offered at the victim’s interview was conducted at Eastern Reception Diagnostic Center. The documents reviewed supports substantial compliance with this provision.</p> <p>h) Training Certificates were provided for all staff designated as qualified victim advocate staff.</p> <p>The facility meets the provisions of this standard based on information from the interviews, documents and policies reviewed.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment."</p> <p>Agency Head Interview – The Director of the Office of Professional Standards was the Agency Head designee for interview and is responsible for the PREA Unit in the office of Professional Standards. He said investigations are completed for all allegations of sexual abuse and sexual harassment in all facilities. The PREA Unit conducts investigations of sexual abuse allegations and the Institutional Investigators conduct investigations of sexual harassment.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment." This policy was found posted on the Prison Rape Elimination Act page of the Missouri DOC website at https://doc.mo.gov/programs/PREA. Policy D1-8.4 Institutional Investigations covers requirements for investigations in general. The policy is identified as confidential; therefore it cannot be posted on the MODOC website. Missouri DOC policy D1-8.1 Office of Professional Standards section E 3 requires allegations of sexual abuse to be referred to the PREA Unit for investigation.</p> <p>Investigator Interview – Both the Institutional and PREA Unit Investigators were interviewed. The Institutional Investigator said PREA reports are referred for investigation using the PREA Allegation Notification Checklist. If the allegation is sexual harassment it stays with the Institutional Investigator. If it is sexual abuse it is referred to the PREA Unit Investigator. The PREA Unit Investigator said she is contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred. If it is determined to be sexual abuse, a Request For Investigation form is completed by the Warden and sent to the PREA Unit.</p> <p>Document Review – OCC reported ten allegations of sexual abuse and sexual harassment in the past 12 months on the PAQ. Nine allegations resulted in an administrative investigation. Two allegations were ongoing investigations. Seven reports of sexual abuse were referred for investigation during the review period. All investigations reviewed were properly referred to an investigator with the authority to conduct an administrative or criminal investigation.</p> <p>The facility meets the provisions of the standard based on the information from interviews, documents and policies reviewed.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard

Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall receive initial PREA training during the department's basic training."

PREA Basic Training Curriculum – The PREA Basic training curriculum was provided for review. It covers the zero-tolerance policy of MODOC; staff responsibilities in prevention, detection, reporting and response procedures; inmate's rights to be free of sexual abuse, sexual harassment and retaliation; staff rights to be free from retaliation; dynamics of sexual abuse; reactions of victims; how to detect signs of sexual abuse; avoiding inappropriate relationships with inmates; and mandatory reporting laws. The curriculum did not cover professional communication with LGBTI inmates. However, The Professional Boundaries lesson plan was provided for review that provides staff information on how to communicate effectively and professionally with LGBTI inmates. This training is all provided at the Basic Academy in pre-service training for new hires.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the time of assignment."

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. Years in which an employee is not required to complete training, the facility site coordinator shall provide refresher information on current sexual abuse and sexual harassment policies."

PREA Refresher #1-12 – After the PREA Basic is completed at academy, staff are required to complete a PREA Refresher training modules every two years. These modules were reviewed and found they did not cover the required topic in (a) 10 mandatory reporting for victims under 18 and vulnerable adults. Topics (a) 1-9 are covered in the refresher training. An intranet PREA flier was provided for review. This is an example of the information that is provided to staff between PREA Refresher.

Staff Interviews – Staff said they receive PREA information via email from the Site Coordinator several times a year in the years between the PREA Refresher training.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All completed PREA training requires a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed the training. This form must be routed through the facility training officer or regional training coordinator."

Document Review – Training records for twelve new hire staff documented the completion of the PREA Basic training in the beginning of employment. Training

	<p>records for six current staff documented the completion of the PREA Refresher training within the last two years.</p> <p>CORRECTIVE ACTION REQUIRED: Information must be added to the bi-annual refresher training for current staff that covers mandatory reporting laws for victims under age 18 or that are vulnerable adults. The revised curriculum will be provided for review and documentation of the new curriculum being provided to all staff.</p> <p>Corrective Action Completed: The PREA Refresher training curriculum has been updated to include information on mandatory reporting laws. These laws mandate that the facility must notify the Missouri Department of Social Services-Children's Division for inmates under 18 who are victims of sexual abuse, or the Department of Health and Senior Services for vulnerable adult inmate victims of sexual abuse. The updated training curriculum was distributed to all OCC staff via email and will be incorporated into the curriculum for subsequent training.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All part-time employees, volunteers, and contract staff members shall receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training."</p> <p>Training Curriculum – The PREA training curriculum for volunteers and contractors was provided for review. The curriculum provides volunteer and contract staff with the MODOC zero-tolerance policy, rights of inmates, signs of sexual abuse, MODOC's response process, dynamics of sexual abuse, reactions of victims, and how to respond to a report of sexual abuse.</p> <p>c) Document Review – PREA Training Acknowledgement forms were provided for forty-three volunteers and ten contract staff.</p> <p>The facility meets the provisions of the standard based on the information from document and policy review.</p>

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” The policy requires the facility to have the PREA offender brochure in several recognized languages. If the brochure is not available in the inmate’s language then an interpretive service will be utilized to provide the information. The PREA offender brochure was provided in seven additional languages. The policy also requires the facility to make PREA reporting information available or visible to all inmates through posters, the offender rulebook, tablets and the brochure. Policy requires the inmates to sign an acknowledgement receipt for viewing the video and receiving the PREA offender brochure.</p> <p>Tour Observations – A PREA education was not observed during the onsite audit. PREA posters were observed throughout the facility in inmate housing unit, program areas, recreation areas, dining hall, medical waiting area and inmate work areas. The posters provided information on how to report sexual abuse and sexual harassment and were printed in English and Spanish. They were placed at a height and in a print size that inmates could easily read. The PREA brochure was provided in both English and Spanish. The brochure provides inmates with information on what is an incident of sexual abuse or sexual harassment, the zero-tolerance policy for MODOC. prevention, reporting, and victim rights.</p> <p>Inmate Interviews – Thirty inmates were interviewed. Almost all inmates could recall being provided a PREA pamphlet, provided a video, and staff explaining the information on either the first or second day after arrival at the facility. All inmates said they see the PREA posters everywhere and some knew the information is on their tablet. If they didn’t recall getting the information at intake, they knew how to make a report based on the information on the posters.</p> <p>Intake Staff Interview – The staff that provide the PREA education said the inmates are provided the PREA brochure on the day of arrival. The next day she shows the video and goes over the information in the PREA brochure. The information she provides includes the zero-tolerance policy, rights of inmates and how to report sexual abuse and sexual harassment. She said she is fluent in Spanish and can explain the information and answer questions for LEP inmates that speak Spanish.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators assigned to investigate offender sexual abuse allegations shall receive specialized PREA investigator training.” The policy reflects the provision’s requirement.</p> <p>Training Curriculum – The NIC PREA: Investigating Sexual Abuse in a Confinement Setting was reviewed by this auditor. The training covers the investigation standards, Miranda, Garrity, evidence collection, forensic examinations, interviewing techniques, understanding the victim, and evidence requirements for substantiating administrative cases or for making a prosecutorial referral. The curriculum covered the requirements of the standard.</p> <p>Investigator Interview – The PREA Unit Investigator said she completed the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting and the advanced NIC investigations course. She also has completed sexual abuse investigation training through VAWA as well. She investigates sexual abuse cases. The OCC investigator said he is a retired police officer and has completed the law enforcement academy that includes sexual assault investigations. He only conducts administrative sexual harassment investigations.</p> <p>Document Review – The NIC PREA Investigations training certificates were provided for the twelve PREA Unit Investigators.</p> <p>The facility meets the standard based on the information from interviews, documents and policies reviewed.</p>
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115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Health services staff members shall receive specialized PREA medical and mental health training.”</p> <p>Training Curriculum – The Centurian PREA Overview training curriculum was provided for review. The curriculum is medical contractor’s specialized medical training that all medical and mental health staff complete. The curriculum comes from Relias training. The training curriculum provides information about what is sexual abuse and sexual harassment; how to detect and assess sexual abuse and sexual harassment; preserving physical evidence; how to respond and communicate with victims; how medical and mental health staff are to report any knowledge or suspicion of sexual abuse and sexual harassment. The training curriculum covers the requirements of this provision of the standard.</p> <p>b) SANE Staff Interview – An SCCC facility nurse said she is on-call SANE for</p>

	<p>central and eastern MODOC facilities along with four other SANE staff. She is certified as a forensic exam nurse. She said she also has completed the specialized medical training through Centurian in addition to the PREA training for contract staff. The training covered how to detect and assess signs of sexual abuse, how to preserve evidence, how to respond to victims, responsibilities for handling a report of sexual abuse. The training is completed online.</p> <p>Medical Staff Interview – The medical staff said she has completed specialized medical training annually through Relias. The training focuses on trauma informed care and covers, signs of sexual abuse, care for victims, protecting evidence, and reporting requirements.</p> <p>Mental Health Staff Interview – The mental health staff said he receives specialized medical training through Relias annually. The training has a trauma informed approach. The training covered protection of evidence, signs of sexual abuse, communication with victims, and reporting sexual abuse and sexual harassment.</p> <p>c) Document Review – Relias PREA Overview training certificates were provided for the Relias specialized medical training for ten medical and mental health staff.</p> <p>d) Document Review – Completed PREA training acknowledgement forms were provided for ten medical and mental health staff.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All offenders shall be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding offender housing assignments, transgender and intersex offenders and the probation and parole procedures regarding housing assignments, transgender and intersex clients, and contracted residential facilities.” The policy requires an assessment for risk of victimization and abusiveness.</p> <p>Risk Screening Staff Interview – Staff that complete risk screening said all inmates that transfer into the facility are screened for risk of victimization and risk of abusiveness. The initial screening is completed within 72 hours of the inmate’s arrival. Usually the first or second day.</p> <p>Inmate Interviews – Most inmates could recall meeting with a case Manager privately</p>

and being asked questions about prior victimization, sexual orientation, gender identity, disabilities, and their views of vulnerability to sexual abuse in the first day or two after they arrived at the facility.

b) Missouri DOC policy IS5-2.3 Offender Internal Classification states "CCMs will conduct a new internal classification within the first 72 hours at that facility and the offender will be housed in accordance with the new internal classification score." The policy requires a new risk assessment to be completed within 72 hours of arrival at the facility.

Document Review - 72 hour risk assessments for thirty inmates were reviewed. All had been completed within 72 hours of the inmates arrival at the facility.

c) Missouri DOC policy IS5-2.3 Offender Internal Classification states "Facilities shall assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities." The risk assessment was provided for review. The factors in the assessment were found to be objective.

d) Risk Screening Staff Interview - The staff that complete the risk screening said she meets with the inmate in private to ask questions for gathering information to complete the risk screening. The questions are about prior victimization, prior perpetration, feelings of vulnerability, disabilities, identifies as or is perceived to be LGBTI or gender nonconforming. She also reviews the inmate records for additional information on criminal history, conduct history, age, size description, sex offenses, and violent offenses.

Document Review - The Internal Classification Risk Assessment was reviewed and found to assess risk of victimization for the following factors: disabilities, age, inmate build, prior incarceration, prior conviction for sex offense with a Child victim, LGBTI or Gender non-conforming, prior victim of sexual abuse, and perception of vulnerability.

Inmates are not detained solely for civil immigration in the MODOC. The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet this provision of the standard.

e) Document Review - The Internal Classification Risk Assessment was reviewed and found to assess risk of abusiveness for the following factors: prior sexual abuse - prior conviction for sex offense with Adult victims; prior convictions for violent offenses - prior convictions for violent crimes; history of prior institutional violence or sexual abuse - conduct for violent offenses past 10 years and conduct violation for murder or forcible sexual conduct older than 5 yrs but less than 10 yrs. Though there is assessment for prior sexual abuse involving adults, not assessing for sex offenses with child victims does not assess for any or all prior sexual abuse. The time restriction on forcible sexual conduct prevents assessing for that conduct that is outside of the timeframe. This doesn't assess for all prior sexual abuse while

incarcerated. This does not meet this provision of the standard.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be reassessed within 30 days of arrival. The reassessment shall consider additional relevant information received by the facility after the initial intake screening."

Risk Screening Staff interview - The staff that conduct risk screenings said she meets with the inmate 4 or 5 days before the 30th day to ask the same questions as asked at the initial risk screening. She uses the information from the inmate and the information from the inmate record to complete another risk assessment. She looks for changes in the inmates answers and any new information that may have been received since the inmate's arrival when completing the re-assessment.

Inmate Interviews - Most inmates could recall meeting with the Case Manager again about a month after arrival at the facility and being asked the same questions from when they arrived. Questions were about prior victimization, gender identity, sexual orientation, feeling of vulnerability and disabilities.

Document Review - Reassessments were reviewed for twenty-eight inmates that had been at OCC for thirty days or more. All twenty-eight had been completed within thirty days of the inmates arrival date.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender's risk level shall be reassessed when warranted due to a referral, incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness."

Risk Screening Staff Interview - The staff that conducts risk screenings said she will complete a re-assessment when there is new information that changes answers on the risk screening or the inmate is a victim or perpetrator of sexual abuse while at the facility.

h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender shall not be disciplined for refusing to answer or not disclosing complete information during the assessment."

Risk Screening Staff Interview - The staff said inmates do not have to answer the questions during the risk assessment interview. If they refuse, they cannot be disciplined.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The chief administrative officer (CAO) or PREA site coordinator shall control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders."

PREA Coordinator Interview - The PREA Coordinator said information obtained for the risk assessment is confidential and access to the electronic system the assessments are completed in is controlled and limited to the staff that need to complete assessments and the staff involved in reviewing them.

Risk Screening Staff interview – The staff said information gathered to complete the risk assessment is confidential and limited to the staff that conduct the risk screenings. Access to the electronic system is limited.

CORRECTIVE ACTION REQUIRED: The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent in the risk of victimization section. The screening for risk of victimization does not meet provision (d). The assessment for abusiveness considers prior sexual abuse involving adults, however by not assessing for sex offenses with child victims it does not assess for all prior sexual abuse. The time restriction on forcible sexual conduct violations prevents assessing for the sexual abuse conduct that is outside of the timeframe. This doesn't assess for all prior sexual abuse while incarcerated. This does not meet provision (e). The internal classification risk assessment must be modified to meet provision (d) and (e). Once the modification of the risk assessment is approved, completed assessments must be provided for review that demonstrate use of the compliant assessment.

Corrective Action Completed: The MODOC PREA Coordinator and Director of Office of Professional Standards said the risk assessment is completed in an electronic computer system that will take more time to modify than is allowed in the corrective action period. As a result, an agreed upon corrective action was developed. The process to complete the assessment was modified by using comment sections in the current assessment to document changes in what is being assessed on specific factors until the MODOC can make permanent changes to the assessment in the electronic system. There were changes to five factors being assessed on the current assessment that had been identified as not meeting the standard.

- Adult victim was added to victimization question 14 for prior sex offense convictions. A comment will be added for scoring Adult victim in addition to the current Child victim.
- Exclusively non-violent criminal history factor in the victimization section will be scored as an override when the answer is No to question 17 in the risk of abusiveness section that scores convictions for crimes of violence. If the answer is No and the victimization section score is 2 points, the staff will complete an override to a Sigma (risk of victimization) in number 20 for the inmate having a non-violent criminal history. Non-violent criminal history will be placed in the comment section.
- Child victim was added to risk of abusiveness question 16 in addition to Adult victim. The comment Child Victim is added if the answer is Yes and the victim is a child.
- Staff were instructed not to follow the time limitations on questions 18 and 19. A Yes response will be given for any institutional conduct history for violence or sexual abuse with comments added to document the information being outside of the time frames.

The changes were added to the training manual for the risk assessment and training was provided to the staff that complete risk assessments at the facility on August 19, 2024 by the PREA Unit Manager. The new assessment process was put in place at

	<p>SCCC following the training. Intake assessments and reassessments completed during August and September were provided for review each week. A total sample of twenty intake assessments and twenty reassessments were reviewed for use of the new process. The MODOC will persist in its efforts to implement changes in the electronic risk assessment to ensure these modifications are permanent.</p>
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115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This shall be in accordance with the institutional services procedures regarding offender housing assignments, transgender and intersex offenders, offender recreation and activities, and probation and parole procedures regarding community supervision centers, the community release center, and contracted residential facilities.”</p> <p>Missouri DOC policy IS5-2.3 Offender Internal Classification states “The department utilizes an internal classification system to assist department staff members in determining appropriate housing, programs, and work assignments of offenders to ensure offender safety, institutional security, and compliance with the Prison Rape Elimination Act (PREA) guidelines.” This policy provides the procedures for completing the PREA risk assessment. The risk assessment is used to guide the placement of inmates in housing assignments and programs. Inmates that are high risk of victimization (Sigma) are not housed in the same cell with inmates that are high risk of abusiveness (Alpha). The facility has a housing assignment report with the internal classification identified on the report. This allows staff to monitor placement based on Sigma, Alpha or Kappa (no risk).</p> <p>Missouri DOC policy IS18-1.1 Required Activities requires housing unit staff to utilize internal classification information to designate required assignments for the purpose of keeping separate and/or ensuring appropriate monitoring of inmates at high risk of being sexually victimized from inmates that are at high risk of being sexually abusive when working or attending programming together.</p> <p>The policies meet the requirements of this provision of the standard.</p> <p>Risk Screening Staff – staff said the risk assessments create a flag for risk of victimization (Sigma) or risk of sexual abusiveness (Alpha). These flags are used to determine housing placement and may be used for program assignments. Inmates that are placed on separate wings in the housing units based on PREA flags.</p>

PREA Compliance Manager – The PREA Site Coordinator said the Sigmas are housed on their own wing and Alphas are housed on their own wing in each of the two housing units. They are never on the same wing. She runs a report from the offender information system with the flags to monitor for correct placement. If an inmate is a high risk for abusiveness, they will not place him in a program or work assignment with a Sigma. This is done on an individual basis.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive.”

c) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee is responsible for determining a permanent housing assignment for each transgender or intersex offender, and prior to this assignment shall meet with each offender to determine his vulnerability within the general population and length of time living as the acquired gender. Transgender and intersex housing assignments shall not be made based solely on genitalia but must consider the offender’s health and safety and the security of the facility through a review of the respective classification, medical and mental health records.”

Missouri DOC policy IS5-3.3 Transgender and Intersex Offenders provides the process for review of an offender that has identified as transgender or intersex at the risk assessment. The staff that conduct the risk assessment notify the PREA Site Coordinator of the transgender or intersex identification. The Transgender Committee is consists of the PREA Site Coordinator, medical administrator, mental health chief, medical director. The Transgender Committee has an initial meeting with the offender. The offender then meets with Mental Health to be reviewed for gender affirming items, hormone therapy treatment consideration, and discuss health and safety concerns. The Transgender Committee completes the Transgender Committee Review form and forwards it to the Transgender Review Team in central administration. The Transgender Review Team consists of the PREA Coordinator, deputy division director, director of rehabilitative services.

PREA Compliance Manager – The PREA Site Coordinator said the facility has a facility transgender committee that meets with an inmate that identifies as transgender at the risk assessment or at any time while housed at OCC. She is on the committee with medical, mental health, the other Deputy Warden, and classification. The committee reviews the inmates views about safety based on the facility housing assignment, work or program assignment, mental health needs, gender affirming clothing needs, and showering separate from other inmates. The committee completes a form and sends it to the PREA Coordinator for the Transgender Review Team in central office to review and to make a final decision.

Transgender Inmate Interview – One inmate that identified to facility staff as transgender said she met with a committee a few days after arrival. The committee talked to her about her feeling of safety and if she was okay with the facility housing

	<p>assignment. They also discussed her needs for gender affirming items and showering at a separate time from other inmates. The facility has separate shower stalls with curtains.</p> <p>d) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee shall meet with the offender within 10 working days of either the offender’s arrival to the facility or upon learning the offender’s transgender or intersex status and every 6 months thereafter.” The transgender inmate was not at OCC long enough to require another Transgender Committee review at the time of the onsite audit.</p> <p>e) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee review shall include the following: (1) Offender’s view of his vulnerability.”</p> <p>Risk Screening Staff Interview – The staff that conducts risk screening said the Transgender Committee completes all review with inmates that identify as transgender.</p> <p>PREA Compliance Manager – The PREA Site Coordinator (DW) said the Transgender Committee would meet with an inmate that identifies as transgender every six months to conduct a review of the inmate’s feelings of safety, facility housing assignment, work assignment or program assignment and any concerns about showers.</p> <p>Transgender Inmate interview – A transgender inmate said she was asked if she felt safe with the current facility housing assignment and program assignment when the Transgender Committee met with her about a week after being at OCC.</p> <p>f) PREA Compliance Manager – The PREA Site Coordinator said inmates that identify as transgender are offered the ability to shower when other inmates do not have access to the bathroom. The facility does have separate shower stalls with shower curtains.</p> <p>Transgender Inmate Interview – A transgender inmate said she was okay with showering when other inmates were in the bathroom as the showers are in separate stalls and have curtains. The inmate didn’t recall if the committee offered separate showers.</p> <p>g) Inmate Interviews – Three Inmates that identify as transgender, gay or bisexual were asked if they felt their housing assignment was in a dedicated wing for transgender, gay or bisexual inmates. All said they felt they were placed in their housing assignment the same as other inmates.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.”</p> <p>MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30 day review. The facility reported on the pre-audit questionnaire no inmates were placed in segregation involuntarily for being a very high risk of a victim of sexual abuse during the review period.</p> <p>Facility Head Interview – The Warden said the goal is to keep inmates in population. However, if an inmate was determined to be at very high risk of being sexually abused he could place the inmate in administrative segregation to allow staff to review the situation. If it is determined the inmate cannot be safely housed in the two housing units at OCC, a transfer to another facility will be requested.</p> <p>Staff Who Supervise Segregation – A Unit Manager said if an inmate is placed in segregation involuntarily the reason would be documented in the inmate confinement report along with the restrictions. A review of placement in administrative segregation is completed during the first week and then again at 30 days. If the inmate could not be placed back in population, a transfer to another facility would be requested. The OCC segregation unit is for short term.</p> <p>The facility meets this standard based on the interviews and policy reviewed.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request (IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline, and d. advocacy agency.” The methods of reporting are communicated to inmates in the PREA offender brochure provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC,</p>

report to any staff, or calling the PREA hotline.

Tour Observations – PREA information posters were observed in each wing of the two housing units and in the area by the showers in the administrative segregation unit.

They were also found in recreation areas, program areas, the dining hall, medical waiting area, and administration areas. The posters provided the PREA hotline number, address to write the Department of Public Safety, and instructed inmates to tell any staff. Posters were placed in locations inmates could easily read them. The PREA Brochure provided inmates information about four ways to report an incident of sexual abuse and sexual harassment. An inmate can report it to any staff, call the confidential PREA hotline, or write to the Department of Public Safety.

Random Staff Interviews – staff said an inmate can call the PREA hotline, write to any staff or talk directly to any staff to report an incident of sexual abuse or sexual harassment.

Inmate Interviews – Thirty inmates were interviewed. All were asked the ways they could report sexual abuse or sexual harassment. All inmates said they could call the hotline or tell any staff. Most also knew they could write to staff by dropping a “kite” in the mailbox on the unit, write to an external agency, file a grievance, or tell family to report for them.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail and not subject to examination.” The policy requires an external reporting method that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure. A poster with a clock on it provides instructions to inmates to tell or write staff, call the PREA hotline by pressing 8 on the inmate phones or writing the Department of Public Safety, Crime Victims Services.

Inmate Interviews – Most inmates said the intake staff told them about an organization outside of DOC they could write and remain anonymous if they wanted. Some also said they saw posters that had information about writing to an organization, but they couldn’t remember the name.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure.”

Random Staff Interviews – Staff all said they are required to take a report in writing, verbally, anonymously or from third parties. Reports would be immediately provided to their supervisor and the shift commander. All staff said they are required to document what was reported and their actions in an incident report.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states

	<p>“Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct.” The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.</p> <p>Random Staff Interviews – Staff said they could talk privately with their supervisor or the shift commander, call the PREA hotline or the ethic line to make a private report. This information was available to staff in posters in the administration area and some had an information booklet they carry.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>b) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not impose a time limit on when an offender may submit a complaint regarding an allegation of offender sexual abuse.” “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.” “Nothing in this section shall restrict the agency’s ability to defend against an offender lawsuit on the ground that the applicable statute of limitations has expired.” The policy allows for any complaints regarding sexual abuse to bypass the informal process and proceed immediately to grievance stage.</p> <p>Document Review – The facility provided one grievance from the victim of an incident of sexual abuse that had an investigation completed. The victim was requesting case file documents for a lawsuit. The grievance was not reporting a new incident sexual abuse, therefore it is not a grievance covered by this standard. Seven sexual abuse investigations were reviewed. None of the allegations was reported through a grievance.</p> <p>c) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.”</p> <p>d) Missouri DOC policy D5-3.2 Offender Grievance states “Offender grievances alleging sexual abuse shall be processed as follows: If determined to be a non-emergency the CAO or designee shall respond within 30 calendar days of receipt.</p>

Non-emergency offender grievance appeals alleging offender sexual abuse shall be processed as follows: a response shall be provided as soon as practical, but no later than 60 calendar days of receipt. Computation of the 60 day time period shall not include the days between the offender's receipt of the offender grievance response and receipt of the offender grievance appeal by the offender grievance unit at central office. Appeals shall be referred to the deputy division director or designee. An extension of time to respond, of up to 70 calendar days, may be claimed if the normal time period for response is insufficient to make an appropriate decision. The offender shall be notified in writing of such extension and shall be provided a date by which a response shall be provided. During the administrative process, including the offender grievance appeal level, if the offender does not receive a response within the time allotted for a reply, including extension, the offender may proceed to the next level of the offender grievance process."

Document Review – The facility provided one grievance from the victim of an incident of sexual abuse that had an investigation completed. The victim was requesting case file documents for a lawsuit. The grievance was not reporting a new incident sexual abuse, therefore it is not a grievance covered by this standard. Seven sexual abuse investigations were reviewed. None of the allegations was reported through a grievance. The facility reported no grievances reporting sexual abuse going over 90 days for the final decision.

e) Missouri DOC policy D5-3.2 Offender Grievance states "Third Party Reporting: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, shall be permitted to assist offenders in filing requests for grievances or appeals relating to allegations of offender sexual abuse. This assistance cannot interfere with the safety and security of the institution. When a staff member receives the documentation from the reporting third party, it shall be attached to the grievance form and shall immediately be recorded in accordance with this procedure. A copy of the documentation shall also be forwarded to the CAO or designee in order to be attached to the possible investigation or inquiry. The CCM shall attempt to discuss the issue with the offender (victim) prior to developing a response to confirm if the alleged victim agrees to have the request filed on his behalf. If the offender declines to have the request processed on his behalf, the CCM shall document the offender's decision and the complaint shall be considered withdrawn for grievance purposes."

The facility reported no grievances reporting sexual abuse by third parties in the last 12 months.

f) Missouri DOC policy D5-3.2 Offender Grievance states "If the CAO or the PREA site coordinator determines that the complaint meets the definition of a PREA emergency grievance, the grievance shall be addressed as follows: The CAO or designee shall prepare an initial response which shall be attached to the grievance and provided to the offender within 48 hours of receipt of the initial filing date. The offender shall sign and date the response. A final response from the CAO or designee shall be provided to the offender within 5 calendar days from the initial filing date. The offender shall sign and date the form. The initial and final response for the

	<p>grievance shall document the department's determination whether the offender is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance."</p> <p>The facility reported no emergency grievances reporting substantial risk of imminent sexual abuse received in the last 12 months.</p> <p>g) The facility reported no disciplinary action against an inmate for filing a grievance alleging sexual abuse in the past 12 months.</p> <p>The facility meets this standard based on the information from interviews, documents and policies reviewed.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall offer alleged victims of offender sexual abuse, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, during the investigative process. When an allegation of sexual harassment is forwarded for investigation, the alleged victim of sexual harassment will be offered a victim advocate. Offenders shall be allowed to communicate with an advocate by mail or special visit in a confidential manner as possible to maintain safety and security of the institution."</p> <p>Inmate Interviews – Most Inmates were aware there were services available for victims of sexual abuse through the victim advocate staff at the facility. Some knew there might be a victim advocate organization outside of the facility that they could write to. Most inmates said they didn't pay attention when staff were covering it at orientation or the posters that are in the facility because they didn't need it.</p> <p>Tour Observations – During the tour, Victim Advocate posters were observed in housing units and other areas inmates frequent. These posters were also uploaded in the online audit system. The posters contain the addresses for Just Detention International and Rape, Abuse and Incest National Network.</p> <p>Victim Advocate Interview – One of the victim advocate qualified staff said he completed a 4 hour online training provided by MCADV. He is notified by the shift supervisor if there is an incident of sexual abuse reported and will report to the facility during off hours. He said the training covered trauma informed care and covered the process of the forensic examination. Conversations with the victim are confidential unless there is information provided that is a safety or security concern. If there is an inmate that is prior victim of sexual abuse, he can provide services as needed or put the inmate in touch with victim advocate organizations.</p>

	<p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before being given access to a victim advocate, the offenders shall be informed of the extent to which communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory reporting laws.”</p> <p>Document Review – Victim Advocate posters have a statement at the bottom informing inmates that letters to the victim advocate organizations will be confidential and not subject to examination by staff.</p> <p>Victim Advocate – This auditor contacted Just Detention International to ask if correspondence has been received from an inmate at the Ozark Correctional Facility during the review period. A response was received stating there had been no correspondence received from an inmate at OCC.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If a facility is unable to enter into a MOU with the advocacy center, the attempt shall be documented and advocacy services shall be provided by a qualified staff member.”</p> <p>PREA Coordinator Interview – The PREA Coordinator said he is communicating with the Missouri Coalition Against Domestic Violence to attempt to obtain an MOU for victim services for all Missouri DOC facilities through correspondence or a hotline.</p> <p>Document Review – A letter of agreement with the Webster County Victims Advocate in the prosecutor’s office was provided for review. The agreement is for victim advocates to provide victim services at the hospital and at the facility when requested. The agreement was signed in November of 2023.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>MODOC PREA Webpage – The Missouri DOC PREA webpage provides information under the Friends and Family section for reporting sexual abuse and sexual harassment by calling, writing or emailing. This was observed at https://doc.mo.gov/programs/PREA.</p> <p>Facility Tour Observation– Posters were observed during the tour in the visiting room that provide visitors with information for reporting sexual abuse and sexual harassment to the PREA Unit of the Missouri DOC. The mailing address, email address and telephone number are on the poster. The poster informs family and friends that the MODOC has zero tolerance for sexual abuse and sexual harassment.</p>

	<p>The poster says “Friends, family or anyone outside of the facility may report sexual abuse or sexual harassment for an offender.” A copy of the poster was placed in the OAS.</p> <p>A test call to the third party reporting phone number was conducted. The call goes to a voicemail. A message was received and responded to the next day. A test email was sent to the doc.prea@doc.mo.gov to test the email third party reporting. A return email was received verifying the test was received.</p> <p>Inmate Interviews – Inmates said they thought they could have their family report an incident of sexual abuse and sexual harassment on their behalf by calling the hotline.</p> <p>The facility meets this standard based on interviews, tour observations and documents reviewed.</p>
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115.61	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Failure to report offender sexual abuse is a Class A misdemeanor in accordance with Missouri state statute. All staff members, shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure.”</p> <p>Random Staff Interviews – Staff said they are required to report any knowledge or suspicion of sexual abuse, sexual harassment, retaliation, or staff failure to report. All staff said they are mandated reporters by state law.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions.”</p> <p>Random Staff Interviews – All staff said all information they receive from an inmate that is reporting sexual abuse or sexual harassment is confidential and could only be shared with staff that need to know as part of the investigation process.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health staff members shall inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes.”</p>

	<p>Medical Staff Interview – Medical staff interviewed said inmates are notified of medical staff’s duty to report any incident of sexual abuse that occurred in an institution the inmate may discuss with them.</p> <p>Mental Health Staff Interview – Mental Health staff interviewed said that he notifies inmates in writing at the beginning of each session he must report any information regarding an incident of sexual abuse that occurred in an institution they share with him.</p> <p>Document Review – There were seven investigations of sexual abuse provided for review. Medical or mental health staff did not receive reports of sexual abuse during the review period.</p> <p>d) A search of the internet found reports of sexual abuse of a vulnerable adult must go to Adult Protective Services at the Department of Health and Senior Services.</p> <p>PCM Interview – The Deputy Warden said there are no inmates under 18 at OCC and there have been no inmates considered to be a vulnerable adult that reported sexual abuse during the review period.</p> <p>e) Warden Interview – The Warden said OCC does not have inmates under 18 and no inmates that would be considered a vulnerable adult reported sexual abuse during the last year.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.62	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, shall immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist.” The facility reported zero incidents of imminent risk of sexual abuse in the past 12 months.</p> <p>Agency Head Interview – The Division Director said the facility would immediately remove an offender from a situation that is a substantial risk of imminent sexual abuse. The facility could move the offender to another work, program, housing assignment or place the offender in protective custody and transfer to another facility.</p> <p>Warden Interview - Warden Interview – The Warden said if an inmate appears to be in</p>

	<p>substantial risk of imminent sexual abuse, they will immediately take measures to protect that inmate. This could be moving the threat, moving the inmate suspect to another housing unit, placing the victim on protective custody in administrative segregation or transfer if needed.</p> <p>Ransom Staff Interviews – Staff said if an inmate was in imminent risk of sexual abuse, they are required to immediately protect the inmate and notify the Shift Commander. They would not leave the inmate until someone takes custody of him.</p> <p>The facility meets the standard based on information from interviews and policies reviewed.</p>
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115.63 Reporting to other confinement facilities	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving an allegation that an offender was sexually abused while confined at a facility outside of the department, the CAO or designee or the appropriate office shall ensure the outside facility is notified of the allegation within 72 hours. The CAO or designee shall maintain documentation of the allegation received and when the outside facility was notified with the allegation.” The facility reported on the PAQ no reports of sexual abuse that occurred at another facility were received during the last 12 months.</p> <p>Warden Interview – The Warden said an inmate at OCC has not reported an incident of sexual abuse that occurred at another facility during the last 12 months.</p> <p>d) Warden Interview – The Warden said if he receives an allegation of sexual abuse that occurred at OCC from an inmate at another facility, he will have the PREA Site Coordinator (DW) complete an RFI and begin an investigation based on the information provided.</p> <p>Document Review – One investigation was for an allegation of sexual abuse that was alleged to have occurred at OCC that came from an inmate at another facility. The allegation was investigated by the PREA Unit after the Warden sent a Request for Investigation with the report.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>

115.64 Staff first responder duties	
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “In the event of an allegation of a penetration act, the first responder shall take the following steps: (1) Ensure the safety of the victim. (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable. (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (4) The shift supervisor shall make telephone notifications and respond as outlined in the facility’s coordinated response to offender sexual abuse protocol.”</p> <p>Random Staff Interviews – Security Staff said if an inmate reports being sexually assaulted within the last 72 hours they would instruct the victim to not change clothes, shower, brush teeth, eat drink, smoke or use the restroom in order to protect evidence from being destroyed. Non-security staff said they would instruct the victim not to change clothes, shower, brush teeth, eat drink, or use the restroom in order to protect evidence from being destroyed. They would then notify security staff, specifically the shift commander’s office and wait for security staff to come take custody of the inmate. All staff said they would separate the victim from other inmates and keep him safe.</p> <p>Document Review – There were seven investigations of alleged sexual abuse during the review period. None of the allegations occurred in a time frame that would allow for the collection of DNA evidence. The inmates that reported the sexual abuse were no longer at OCC during the onsite audit. Most inmates are at OCC for less than a year.</p> <p>The facility meets the standard based on the interviews, documents and policies reviewed.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The Ozark Correctional Center provided The Coordinated Response to Offender Sexual Abuse for review. This is OCC’s institutional plan to coordinate staff actions in response to an incident of sexual abuse. The plan provides basic roles to staff first responders, medical and mental health staff, the Shift Commander, PREA Site Coordinator, victim advocate staff, and the Chief Administrative Officer or designee. The plan also covers staff response to allegations of penetration and non-penetration incidents.</p> <p>Warden Interview – The Warden said the facility has a coordinated plan for response</p>

	<p>to a report of sexual abuse that involves Medical, Mental Health, PREA Site Coordinator, Advocate Staff and Investigator. The plan provides procedures for each person's role.</p> <p>The facility meets this standard based on information from interviews and the coordinated plan reviewed.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) MDOC policy D2-11.6 Labor Organization states "Per the Prison Rape Elimination Act, the department shall not enter into or renew any collective bargaining agreements or other agreements that limit the department's ability to remove alleged staff sexual abusers from contact with any offender or resident pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted."</p> <p>Agency Head Interview - The designee for the MODOC Director said the Missouri DOC does have an active bargaining unit agreement, but it does not limit the agency's ability to remove staff alleged to have committed sexual abuse away from inmates during the investigation the same as other staff.</p> <p>PREA Coordinator Interview - The PREA Coordinator said the Missouri DOC has a collective bargaining agreement for staff, but it does not prevent the removal of staff from contact with an offender that alleged sexual abuse by the staff. He said the agreement may have expired and has not been renewed.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The PREA site coordinator shall ensure victims, individuals who report sexual abuse, and those that cooperate with offender sexual abuse investigations are monitored and protected from retaliation." The facility reported on the PAQ the staff designated to conduct retaliation are the PREA Site Coordinator (PCM), and the Functional Unit Managers.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires</p>

the PREA Site Coordinator to offer emotional support services to offender victims, witnesses, reporters, staff reporters and staff witnesses.

There were no inmates that reported sexual abuse at the facility to be interviewed about retaliation monitoring during the onsite audit.

Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.

Warden Interview – The Warden said if retaliation is suspected, they can move the inmate suspect or staff to separate them from the inmate. Emotional support services would be offered to the inmate subjected to retaliation.

Staff designated with Retaliation Monitoring – The Unit Manager said he has the initial meeting with the inmate a couple of days after he is assigned to do monitoring. He asks the inmate if they need a victim advocate or would like to see mental health. If retaliation is suspected, he can move the inmate or the staff suspected of retaliating. The inmate suspect can go to administrative segregation if needed. He notifies the PREA Site Coordinator (PCM) of the retaliation so it can be investigated.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The alleged victim of offender sexual abuse shall be monitored for a minimum of 90 days to assess any potential risk or act of retaliation. The Assessment/Retaliation Status Checklist form shall be used during each of the assessment interviews. If the victim expresses fear of retaliation, monitoring shall continue for an additional 90 day period or until the victim or reporter is no longer in fear of retaliation or if the investigation is unfounded.” The facility reported on the PAQ there were no incidents of retaliation in the last 12 months.

Documentation Review - Six sexual abuse investigations required retaliation monitoring. Retaliation monitoring of the inmate victim was documented on an Assessment/Retaliation Status Checklist in all six investigations.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Monitoring shall include face-to-face status checks.”

Staff designated with Retaliation Monitoring – The staff that conducts monitoring said he meets with the victim in person a few days after the report is received and every 30 days after that initial meeting.

Document Review - All monitoring started within a week after the report was received. Staff met with the inmate at an initial meeting and at 30 days, 60 days and 90 days. Meetings were documented by staff and inmate signatures at each meeting. Items reviewed for the meeting were conduct, housing assignment, program and work assignment. Any concerns by the inmate were documented.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Reporters and witnesses shall be monitored for retaliation at the minimum of one time utilizing the assessment-retaliation status checklist form. If no retaliation is

	<p>reported, monitoring will cease.” This requirement of the policy would include inmate witnesses and inmate reporters. Provision (d) requires all inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate witnesses and inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate witnesses and inmate reporters the same as monitoring for inmate victims.</p> <p>Warden Interview – The Warden said protective measures will be taken for witnesses, reporters and other individuals that cooperate with an investigation that say they have concerns about retaliation.</p> <p>CORRECTIVE ACTION REQUIRED: Provision (d) requires all inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate witnesses and inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate witnesses and inmate reporters the same as monitoring for inmate victims. Provide the policy change and documentation of the change in policy and practice being communicated to all PREA Site Coordinators.</p> <p>Corrective Action Completed: The Agency has updated policy D1-8.13 Offender Sexual Abuse and Harassment to now include third-party inmate reporters in face-to-face monitoring meetings for 90 days, aligning with the existing monitoring requirements for inmate victims. Staff who report sexual abuse will undergo 90 days of monitoring and receive a flyer detailing how to report any retaliation to the Warden, PREA Hotline, CLEAR line, PREA Email, or the Office of Professional Standards email. Offenders or staff who cooperate in a sexual abuse investigation as witnesses and express concerns about retaliation will be evaluated and protected from retaliation. This policy revision and its implementation were communicated to the PREA site Coordinators (PCM) by the PREA Unit Manager (PREA Coordinator) on August 23, 2024, via email.</p>
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115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Following an allegation of offender sexual abuse or if an offender is assessed as being at high risk of victimization, the shift supervisor shall ensure the offender is housed in the least restrictive housing available to ensure safety. When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk.</p>

	<p>The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.” MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30 day review.</p> <p>The facility reported zero inmates were placed in administrative segregation involuntarily after reporting sexual abuse during the reporting period. There were no inmates in segregation at the time of the onsite audit for reporting sexual abuse.</p> <p>Warden Interview – The Warden said if an inmate that reports sexual abuse is deemed not safe in either open population housing unit, he would be placed in administrative segregation. A transfer would be pursued if there was no safe alternative. OCC is a treatment program with only two housing units. There are fewer options for housing placement.</p> <p>Staff that Supervise Segregation – Staff said he has not had an inmate involuntarily placed in segregation after reporting sexual abuse. He said the inmate confinement record documents the reason for placement in segregation as the only alternative and the restrictions to privileges, work and programs.</p> <p>The facility meets the standard based on the interviews and policies reviewed.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she is immediately contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Facility Investigator – The Facility Investigator said he investigates only sexual harassment allegations. Any allegation that is unclear what type of incident it is, he will do an initial review to determine the type of incident. He said it takes one or two working days to initiate an investigation for a sexual harassment allegation.</p> <p>Investigation file review – There were seven investigations of sexual abuse in the last 12 months. The investigations were initiated promptly, thoroughly documented and objectively. One investigation was initiated by an anonymous report.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states</p>

"Investigators shall receive specialized PREA investigation training prior to conducting an investigation involving offender sexual abuse." The PREA Unit Investigators conduct all of the sexual abuse investigations.

PREA Unit Investigator – The PREA Unit Investigator said she has completed the NIC Sexual Abuse Investigations in a Confinement Setting, the NIC Advanced Sexual Abuse Investigations training and training by VAWA online.

Document Review – NIC training certificates were provided for the 12 investigators in the PREA Unit.

c) PREA Unit Investigator Interview – The PREA Unit Investigator said she receives a Request For Investigation from the facility and the PREA Notification Checklist when there is a clear sexual abuse allegation. The PREA Unit Investigators conduct the administrative and criminal investigations for sexual abuse. She reviews the initial information, reviews video evidence if available, conducts a background investigation of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident. The facility will assist by protecting the scene and the SANE staff collecting evidence through a forensic examination.

PREA Unit Investigator Interview – The PREA Unit Investigator said she receives a Request For Investigation from the facility and the PREA Notification Checklist when there is a clear sexual abuse allegation. The PREA Unit Investigators conduct the administrative and criminal investigations for sexual abuse. She reviews the initial information, reviews video evidence if available, conducts a background investigation of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident. The facility will assist by protecting the scene and the SANE staff collecting evidence through a forensic examination.

Document Review – There were seven investigations provided for review. All seven were allegations of sexual abuse and all were investigated by a PREA Unit Investigator. Investigation reports documented video evidence, circumstantial evidence, interview with the victim, witnesses and suspected perpetrator. Prior investigations were reviewed for involvement of the victim and alleged perpetrator.

d) PREA Unit Investigator Interview – The PREA Unit Investigator said they do not conduct compelled interviews. If a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it certified mail to document the referral.

e) PREA Unit Investigator Interview – The PREA Unit Investigator said she is not allowed to subject the victim to a truth telling device. The subject of the investigation could be asked to complete a voice stress analysis. She determines the subject's credibility on a case by case basis from the background review of prior criminal history, PREA investigations and conduct.

	<p>Facility Investigator – The Facility Investigator said he would not use a truth telling device on the victim. He has not used a Voice Stress Analysis in a sexual harassment investigation.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall include an effort to determine whether staff member actions or failure to act contributed to the abuse.”</p> <p>PREA Unit Investigator – The PREA Unit Investigator said she reviews staff actions in relation to the coordinated response plan, policies and procedures.</p> <p>g-h) Investigation File Review – None of the seven sexual abuse investigations were criminal investigations. All were administrative investigations. The four that were substantiated did not have a clear criminal violation or did not meet the probable cause standard for a criminal referral.</p> <p>i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Inquiries regarding offender sexual abuse and harassment and all supporting documents shall be retained as long as the alleged perpetrator is incarcerated or employed with the department, plus 5 years and in accordance with the department procedure regarding records retention.”</p> <p>j) Investigator Interview – Both investigators interviewed said if the victim or the subject left the facility, they would do their best to contact staff via telephone with contact information from HR or contact the Parole Officer for the inmate to arrange a phone interview.</p> <p>Investigations File Review – in four investigations, the staff subject resigned. In all four cases, the investigator either contacted the staff for interview or made several attempts to contact the staff to attempt an interview. In one investigation the inmate victim transferred to another facility for unrelated reasons. The investigator conducted the interview with the inmate at the other facility. In all cases the investigators continued and completed the investigations even though the victim or alleged perpetrator left the facility. The documentation meets this provision of the standard.</p> <p>The facility meets the provisions of the standard based on the interview, documents and policies reviewed.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall impose no standard higher than the

	<p>preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.”</p> <p>Investigator Interviews – The Facility Investigator said he uses the evidence standard of preponderance of evidence for administrative investigations he conducts for sexual harassment. He said that means it is more likely than not that the allegation happened as reported. The PREA Unit Investigator said she uses the preponderance of evidence standard for the administrative investigations of sexual abuse.</p> <p>Investigation Review – All seven investigations of sexual abuse were an administrative investigation. Four investigations were substantiated based on the preponderance of evidence standard.</p> <p>The facility meets this standard based on the information from interviews, policies and investigations reviewed.</p>
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115.73 Reporting to inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon the completion of an offender sexual abuse investigation, the department’s PREA unit shall make written notification to the alleged victim regarding the outcome of the investigation utilizing the applicable PREA alleged sexual abuse by offender notification form or the PREA alleged sexual abuse by staff member notification form.” The facility reported seven investigations of sexual abuse in the last 12 months resulting in seven notifications of results in writing. There were no inmates that reported sexual abuse to interview at the facility during the onsite audit.</p> <p>Warden Interview – The Warden said a written notice of investigation outcome is provided to inmates for sexual abuse and sexual harassment investigations.</p> <p>PREA Unit Investigator Interview – the PREA Unit Investigator said she provides the written notification to the facility PREA Site Coordinator (PCM). The PREA Site Coordinator provides the written notification to the inmate.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All subsequent notifications shall be made when: Staff member on offender allegations: following the completion of the investigation, the offender shall be notified when the following occurs (unless the investigation is unfounded); The staff member perpetrator is no longer assigned to the housing unit; The staff member perpetrator is no longer employed by the department; The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution; A disposition of charges exists related to sexual abuse within the institution.”</p>

	<p>Investigation File Review – Six of the seven sexual abuse investigations involved staff. A written notification of outcome involving an allegation of staff sexual abuse was provided at the conclusion to the inmate victim in all six investigations.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offender on offender allegations: following the completion of an investigation, the offender shall be notified when the following occurs: (1) The offender has been indicted on a charge related to sexual abuse within the institution. (2) A disposition of charges exists related to sexual abuse within the institution.”</p> <p>Investigation File Review – One of the seven sexual abuse investigations involved inmate sexual abuse. A written notification of outcome was provided to the victim at the conclusion of the investigation.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA unit shall forward the written notification to the offender via the PREA site coordinator. The PREA site coordinator shall ensure that the written notification is provided to the offender in a confidential manner.” All seven investigations provided the victim a written notification of investigation outcome.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures.” The policy follows this provision.</p> <p>Document Review – A letter of dismissal to an OCC staff member was provided for review. The staff was dismissed for failing to show up for work and not calling. The dismissal was during the investigation that was later substantiated. There were no other staff disciplined for sexual abuse or sexual harassment violations during the review period.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Termination from the department shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse.” The policy follows this provision. The facility reported one staff termination during the audit review period.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All terminations for violations or the resignation of a staff member, who would have</p>

	<p>been terminated if not for their resignation, shall be reported to relevant licensing or accreditation bodies and law enforcement.” The policy follows this provision. The staff terminated did not have a professional license.</p> <p>Human Resources Staff Interview - Human Resources Staff Interview – The HR staff said the dismissal of staff is handled by the warden through the agency central office HR. Staff discipline is progressive and based on prior history. A substantiated sexual misconduct would be grounds for termination.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies and law enforcement.” The policy reflects the provisions of the standard. The facility reported on the PAQ no contract staff or volunteers were reported to law enforcement or professional licensing bodies during the last 12 months.</p> <p>Warden Interview – The Warden said if a contract staff or volunteer had an allegation of sexual abuse, they would be barred from entry to the facility until the investigation is resolved. If it is substantiated, it would be a permanent gate closure. A substantiated sexual harassment would be reviewed on a case-by-case basis to determine if removal is appropriate.</p> <p>Document Review – Letters of resignation from two contract staff were provided for review. The contract staff resigned during a sexual abuse investigation. The investigations continued and were determined to be substantiated based on preponderance of evidence in an administrative investigation. There was no criminal investigation because there was no clear criminal law violation. The contract staff were permanently barred from entry to OCC.</p> <p>The facility meets the standard based on the information from interviews, documents and policies reviewed.</p>

115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>

- a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be subject to corrective actions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender on offender sexual abuse in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard. There was one substantiated investigation of inmate sexual abuse during the review period. The inmate perpetrator was given a conduct violation for sexual misconduct.
- b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.
- c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The corrective action process shall consider whether an offender's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, shall be imposed in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.
- Warden Interview – The Warden said an inmate's cognitive disabilities and mental health can be used as mitigating factors in sanctioning for sexual abuse and sexual harassment conduct violations.
- d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "If found guilty of sexual abuse, the PREA site coordinator or designee shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."
- Mental Health Staff Interview – Mental health staff said inmates that are substantiated as a perpetrator of sexual abuse at OCC would be referred to mental health for counseling. Therapy would target triggers for behavior. The inmate would not be restricted from programming for refusing to participate.
- e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact."
- f) Missouri DOC policy IS19-1.6 Offender Accountability Program states "a report of sexual misconduct, made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying." The policy reflects this provision of the standard.
- g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department prohibits all sexual activity between offenders. Consensual sexual

	<p>activity between offenders shall not be deemed sexual abuse and shall be addressed in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has experienced prior sexual victimization, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening.” The facility reported 100% of inmates that disclosed prior victimization at the risk assessment were offered a follow up meeting with mental health.</p> <p>Risk Screening Staff Interview – The staff that conducts risk screening said she offers mental health services to inmates that report being a prior victim of sexual abuse on the assessment interview. If they accept the offer, she completes a referral form and sends it to mental health.</p> <p>Mental Health Staff Interview – Mental Health staff said he receives referrals for inmates that report being a prior victim of sexual abuse from the Case Manager through email.</p> <p>Document Review - Seven inmates that reported being a prior victim at the risk assessment were offered mental health counseling that was documented on the risk assessment. Two of the inmates accepted the offer and five declined. The referral form was provided for one of the two. Both inmates said they saw mental health from the referral after reporting being a prior victim.</p> <p>Inmate Interviews – Seven Inmates reported being a prior victim of sexual abuse on the risk assessment. Two inmates said they accepted and received mental health services.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has previously perpetrated sexual abuse, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a mental health practitioner within 14 calendar days of the intake screening.”</p> <p>Document Review – Risk assessments were reviewed. One inmate had a prior</p>

	<p>conviction for a sex offense. A request was made for the mental health referral. The record of the referral could not be found. A new mental health referral was made as a correction.</p> <p>Risk Screening Staff Interview – The staff that conducts risk screening said she offers mental health services to inmates that report being a perpetrator of sexual abuse on the assessment interview or are documented in the inmate record as having prior convictions for sex offenses. If they accept the offer, she completes a referral form and sends it to mental health.</p> <p>d) Risk Screening Staff Interview - Staff that conduct the risk assessment said the information they gather from inmate interviews and the inmate record to complete the risk assessment is confidential and strictly limited to staff involved in the risk assessment process and review. The risk assessment is completed in an electronic system that access must be granted.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting.”</p> <p>Medical Staff Interview – medical staff said they are not allowed to share information reported by an inmate about prior sexual abuse that occurred in the community with facility investigation staff without a signed informed consent from the inmate.</p> <p>Mental Health Staff Interview – The Mental Health Director said inmates are informed of mental health staff duty to report in writing prior to a therapy meeting. If an inmate provides information about an incident of sexual abuse at an institution to mental health staff, the staff must report it to the facility investigator.</p> <p>The facility meets the provisions of this standard based on interviews, documents and policies reviewed.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional judgment.” There were no inmates that reported sexual abuse to interview at the time of the onsite audit.</p> <p>Medical Staff Interview – Medical staff said inmates that are victims of sexual abuse</p>

	<p>would be assessed and treated for emergent injuries and instructed not to destroy evidence until a forensic examination can be conducted. The forensic exam can be conducted by the SANE staff from SCCC or the inmate can be taken to a local hospital with a forensic exam department if a regional MODOC SANE is not available.</p> <p>b) Staff Interviews – All staff said they would protect the victim until the shift supervisor arranged for staff to take the victim to medical or they were instructed to take the victim to medical. The Shift Commander would notify medical about the sexual abuse report. If medical staff were temporarily unavailable, custody staff would wait with the victim until they could be seen by medical.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections by the MODOC SANE or by the hospital SANE.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>The facility meets the provisions of the standard based on information from interviews and policies reviewed.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each victim and abuser shall be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals shall be completed for continued care following their transfer to, or placement in, other facilities or their release from custody.”</p> <p>Medical Staff Interview – medical staff said inmate victims of sexual abuse would be provided follow up treatment on injuries and medication management for STI care.</p> <p>Mental Health Staff Interview – The Mental Health Director said victims of sexual abuse would be offered treatment services based on trauma informed care.</p>

	<p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims and abusers shall be provided with medical and mental health services consistent with the community level of care."</p> <p>Mental Health Staff Interview - The Mental Health Director said the victim would be provided mental health services similar to services offered in the community.</p> <p>Medical Staff Interview - The medical staff said the medical services provided to the victim would be similar to the services offered in the community.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate."</p> <p>Medical Staff Interview - Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."</p> <p>h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."</p> <p>Mental Health Staff Interview - The Mental Health Director said if the inmate perpetrator wanted services, he would try to identify triggers that cause the abusive behavior.</p> <p>The facility meets the provisions of this standard based on information from interviews and policies reviewed.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded." The policy</p>

reflects this provision of the standard.

Investigation File Review – Seven allegations of sexual abuse were investigated during the review period with none being unfounded. All seven sexual abuse investigations had a PREA Sexual Abuse Debriefing completed.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.

Document Review – Seven PREA Sexual Abuse Debriefing documents were reviewed. Five of the Seven reviews were completed less than 30 days from the investigation conclusion. Two were completed a few days over 30 days, however the majority of sexual abuse incident reviews being completed in less than 30 days. Based on the documentation reviews were ordinarily completed within 30 days per the provision language.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The review team for offender sexual abuse events shall include the PREA site coordinator, and other upper level administrators, when applicable, with input from the shift supervisor, investigators, and medical or mental health practitioners.” The policy reflects this provision of the standard.

Warden Interview – The Warden said sexual abuse investigations are reviewed by a team that consists of the PREA Site Coordinator, mental health staff, medical staff and the investigator.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA sexual abuse incident debriefing report shall be completed by the PREA site coordinator outlining in detail the findings of the incident debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse incident debriefing form.” The form requires the review team to answer questions for the five factors in this standard.

Warden Interview – The Warden said the incident review team documents the review on the PREA Sexual Abuse Debriefing form and provides a copy to him and to the PREA Unit in central office.

PREA Compliance Manager Interview – The PREA Site Coordinator (PCM) was interviewed as a member of the incident review team. She said the review team consists of her, the other Deputy Warden, medical staff, mental health staff, and the investigator. The review looks at all evidence including the investigation report, video evidence, interviews, and physical evidence. The review team considers factors about the victim that may have contributed to the sexual abuse, such as race, sexual orientation, gender identity, gang affiliation, staff rounds, video camera deployment, and blind spots. The review is documented on a report along with any recommended

	<p>corrective actions and provided to the Warden and the PREA Unit in central office. The Warden can document if the recommendations can be implemented and if not, why.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The facility shall implement the recommendations for improvement, or shall document its reasons why recommendations shall not be implemented.” The policy reflects this provision of the standard.</p> <p>The facility meets the provisions of this standard based on information from interviews, document and policies reviewed as described above.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Annual Site Report: Each facility shall utilize information from the offender sexual abuse incident debriefings to prepare an annual report to be submitted to the department’s PREA manager by the last working day in March.” The policy provides the definitions for sexual abuse and sexual harassment in section II. The definitions are equal to the definitions in the PREA standards</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions.”</p> <p>c) Missouri DOC Annual Report – The 2022 and 2021 MODOC PREA Annual Reports were reviewed. The reports provided a table of data broken down by incident type and outcomes. This data can be used to complete the Survey of Sexual Victimization summary report.</p> <p>d) PREA Coordinator Interview – The PREA Coordinator said all information and data from incidents of sexual abuse and sexual harassment are retained in the Investigative Reporting Intelligence System.</p> <p>f) PREA Coordinator Interview – The PREA Coordinator said he uses the data and incident information for substantiated investigations from the Investigative Reporting Intelligence System to complete the Survey of Sexual Victimization when it is requested.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Agency Report: The PREA manager shall prepare an annual report compiling each facility's current year's data and corrective actions. a. The report shall include: (1) a comparison with prior year's data, (2) corrective actions, and (3) an assessment of the department's progress in addressing offender sexual abuse."</p> <p>2021 & 2022 PREA Annual Report - The PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>Agency Head - The Division Director said incident data is used to assess and improve housing assignments, video monitoring and staffing levels. Additional training is provided to staff through PREA Unit staff speaking at basic training courses.</p> <p>PREA Coordinator - The PREA Coordinator said the annual report compares data since 2013 and summarizes ongoing corrective actions.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department's annual PREA report shall be made available to the public on the department's internet website."</p> <p>Agency Head - The Division Director said the Director approves the report prior to posting it on the department's website.</p> <p>Document Review - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. Though the Agency Head Designee said the reports are reviewed and approved by the Director, the reports are not signed by the Director either electronically or by signature. It is recommended that the annual report be signed by the Director or designee each year.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The CAO or designee, PREA manager or department director shall edit specific material from the reports when publication would present clear and specific threat to the safety and security of a facility. The CAO or designee, PREA manager, or department director shall indicate the nature of the material edited."</p> <p>PREA Coordinator - The PREA Coordinator said personally identifying or confidential information about incidents are not included in annual reports.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>PREA Coordinator – The PREA Coordinator said the PREA incident information is securely stored in the Investigative Reporting Intelligence System (IRIS). Access to IRIS is limited to investigators, PREA Site Coordinators, Warden’s and other staff directly involved in incident investigation and review.</p> <p>Missouri DOC Annual PREA Report - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The last two years of PREA Annual Reports were reviewed and found to have a comparison of sexual abuse data from 2013 to 2022. The reports did not contain any personal identifiers.</p> <p>The facility and agency meet this standard based on the information from the PREA Coordinator interview and review of annual reports found on the MODOC PREA webpage.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. Ozark Correctional Center was audited three years ago. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all of their facilities during all audit cycles.</p> <p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with inmates in a private room with a window for observation by staff.</p> <p>A notice of audit was posted throughout the facility six weeks prior to the onsite audit notifying inmates they could send confidential correspondence to this auditor. No letters were received prior to the onsite audit from inmates.</p> <p>The facility and agency meet this standard</p>

115.403	Audit contents and findings
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the Missouri DOC website PREA page found PREA audit reports for all MODOC facilities from 2014 to 2023.</p> <p>The agency has been posting all final audit reports on its website as required by this standard.</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b) Policies to ensure referrals of allegations for investigations		
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c) Policies to ensure referrals of allegations for investigations		
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a) Employee training		
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	no

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)	
	<div data-bbox="320 185 1273 555"> <p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div>

PREA Facility Audit Report: Final

Name of Facility: South Central Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 04/05/2024

Date Final Report Submitted: 09/27/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 09/27/2024

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	02/06/2024
End Date of On-Site Audit:	02/08/2024

FACILITY INFORMATION	
Facility name:	South Central Correctional Center
Facility physical address:	255 MO-32, Licking, Missouri - 65542
Facility mailing address:	

Primary Contact

Name:	
Email Address:	
Telephone Number:	

Warden/Jail Administrator/Sheriff/Director	
Name:	Michele Buckner
Email Address:	michele.buckner@doc.mo.gov
Telephone Number:	573-674-4470

Facility PREA Compliance Manager	
Name:	Heath Cantrell
Email Address:	heath.cantrell@doc.mo.gov
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Kathy Barton
Email Address:	kathy.barton@doc.mo.gov
Telephone Number:	573-674-4470

Facility Characteristics	
Designed facility capacity:	1628
Current population of facility:	1592
Average daily population for the past 12 months:	1606
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males

Age range of population:	18-99
Facility security levels/inmate custody levels:	1-5
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	423
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	71
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	48

AGENCY INFORMATION

Name of agency:	Missouri Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2729 Plaza Drive, Jefferson City, Missouri - 65109
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102
Telephone number:	5737512389

Agency Chief Executive Officer Information:

Name:	Trevor Foley
Email Address:	Trevor.Foley@doc.mo.gov
Telephone Number:	573-526-6607

Agency-Wide PREA Coordinator Information

Name:	Darren Snellen	Email Address:	darren.snellen@doc.mo.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

1

- 115.21 - Evidence protocol and forensic medical examinations

Number of standards met:

44

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-02-06
2. End date of the onsite portion of the audit:	2024-02-08

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The prison is in a very remote location. There were no community-based organizations for victims in the area. The facility provides the address for Just Detention International to inmates for correspondence with victim advocates. This auditor did contact Just Detention International to inquire if any correspondence was received from an inmate at SCCC.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1628
15. Average daily population for the past 12 months:	1606
16. Number of inmate/resident/detainee housing units:	7

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1597
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	68
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	462
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	32
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	151

42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	6
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	49
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	16
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	38
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	196
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	237
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	47
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	73
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	17

<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Age</p> <p><input type="checkbox"/> Race</p> <p><input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Inmates were randomly selected from an inmate list based on housing unit.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Twenty inmates were randomly selected for interview. Three became targeted interviews based on information provided during the interview.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>23</p>

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div data-bbox="815 1615 1469 1776"> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div data-bbox="815 1823 1469 1906"> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	<p>The PCM asked the staff that conduct the intake assessments to identify any inmates that were blind or had visual impairment. The staff said there were none at the time of the onsite audit. None of the inmates interviewed had a visual impairment or were blind.</p>
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	<p>1</p>
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	<p>2</p>
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	<p>2</p>
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	<p>5</p>
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	<p>5</p>

68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	5
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported no inmates were placed in segregation involuntarily for risk of victimization or reporting sexual abuse at the time of the onsite audit.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	Two targeted and one random inmate refused to be interviewed. They were replaced with two from the targeted list and a random selection. Three inmates that were randomly selected reported during the interview they identify as transgender.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Random staff were selected from the shift roster provided on the first day. If staff were not scheduled to work during that day, they were not selected. Staff were selected that work in housing units and other areas of the facility. eleven were security staff and one was administrative staff.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	17
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No

78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☒ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☒ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☐ First responders, both security and non-security staff
- ☒ Intake staff

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

83. Provide any additional comments regarding selecting or interviewing specialized staff.	The facility identified the staff to be interviewed for each specialized staff interview category. Specialized staff were interviewed through Webex virtual interviews and in person at the onsite audit.
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SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Ten staff were selected from a list of staff hired in the last 12 months for review of criminal background checks, PREA employment background checks, questions about prior sexual abuse, and training records. The criminal background check and PREA training records were reviewed for all of the randomly selected staff that were interviewed. Ten medical and mental health contract staff were selected for record review from a list of all medical and mental health staff the facility provided. Three contract staff from foodservice were selected for record review. Housing unit logs were requested and reviewed for dates randomly selected in four months during the review period. PREA education and risk assessments were reviewed for all targeted and randomly selected inmates that were interviewed. Investigation files were reviewed for all investigations completed during the review period.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	15	0	15	0
Staff-on-inmate sexual abuse	6	6	6	6
Total	21	6	21	6

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	1	0	1	0
Staff-on-inmate sexual harassment	3	0	3	0
Total	4	0	4	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	8	0	0	0	0
Staff-on-inmate sexual abuse	4	0	0	0	0
Total	4	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	8	2	13	0
Staff-on-inmate sexual abuse	4	0	3	3
Total	12	2	16	3

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	4	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	4	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	4	0	1	0
Staff-on-inmate sexual harassment	0	0	2	1
Total	4	0	3	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

21

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	15
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	6
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	4
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

3

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

All investigation files that were completed during the review period were requested for review. Ongoing investigations were not reviewed.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☐ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment is the policy that provides the zero-tolerance policy, definitions of sexual abuse and sexual harassment, and the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The South Central Correctional Center Coordinated Response to Offender Sexual Abuse provides the facility's plan for responding to reports of sexual abuse and the definitions for sexual abuse and sexual harassment.</p> <p>b) Based on the organization charts provided, the Missouri Department of Corrections has a PREA Coordinator in the Office of Professional Standards that reports to the Director of that division. The Director of OPS then reports to the MODOC Director.</p> <p>PREA Coordinator Interview – The PREA Coordinator said he has sufficient time and authority to fulfill the duties of the PREA Coordinator for the agency. He oversees the PREA Unit that consists of dedicated investigators and support staff that assist him in</p>

	<p>managing and monitoring PREA standards compliance and PREA investigation at all facilities in the agency. Each facility has a PREA Compliance Manager that reports to him for PREA Compliance matters.</p> <p>c) Based on the organization chart provided, South Central Correctional Facility has designated a Deputy Warden of Inmate Management as the PREA Compliance Manager for the facility. The Deputy Warden is an executive level position at the facility and reports directly to the Warden.</p> <p>PCM Interview – The PREA Compliance Manager said he has sufficient time and authority to complete the duties of PCM for the facility.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>It was reported on the PAQ that the Missouri Department of Corrections currently does not contract for the confinement of inmates with a private or other governmental agency. The PREA Coordinator stated in his interview the Missouri DOC is not contracting with anyone for confinement of inmates at this time.</p>

115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires each facility to “maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse.” “The staffing plan shall consider the facility’s physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.”</p> <p>Document Review – A memorandum from the SCCC Chief of Custody to the SCCC PREA Coordinator (PREA Compliance Manager) with subject “Staffing Plan” was provided as the SCCC staffing plan. The memorandum listed the total custody staff authorized broken down by position and the total custody staff authorized by shift. The plan did not include a breakdown of posts, staff position for posts and relief for</p>

those posts.

Tour Observation – During the facility tour, this auditor observed staff monitoring all areas of the facility where inmates were present. Video monitoring was found throughout the facility covering areas where staff are not constantly present.

Security staff were observed conducting rounds in these areas such as the warehouse, education area, vocational training. Non-security staff were also present in the library, foodservice, medical, and chapel. Housing units each had multiple custody staff present and were observed conducting rounds on the housing unit pods.

Four staff bathrooms were observed in the programs building in areas of inmate access standing open with a lock on the inside but not on the outside. There was no way to lock the doors to prevent inmate access but allow staff access. Inmates could go in these bathrooms and lock the doors. These doors must have a key lock installed in the handle so the door can remain locked at all times and allow staff access to it.

CORRECTIVE ACTION REQUIRED: a staffing plan was not provided. The staffing plan should be a document that clearly identifies the intended deployment of staff by describing relieved posts and positions, the types of employees to be assigned, the location of the post/position in the facility, and the purpose of the post/position.

Corrective Action Completed: A staffing plan was documented in a Master Post Listing, CO I Staffing Dashboard Report, Facility Organizational Chart, and an Institutional Staff Roster and provided with a review. The review of the staffing plan was completed and documented in a Facility Staffing Plan Review document that was completed by the PREA Site Coordinator (PCM) and sent to the PREA Unit Manager (PREA Coordinator) for MODOC for review. The review covered thirteen factors that are required in substandard (a) and (c). the review was signed by the Major, PREA Site Coordinator and Warden.

CORRECTIVE ACTION REQUIRED: Install locks on four staff bathrooms to enable locking the doors at all times and still provide staff access.

Corrective Action Completed: Locks were installed on the bathrooms identified as being a potential blind spot. Photos of the doors with new key locks were provided for proof of completion.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall comply with the staffing plan on a regular basis, deviations from the staffing plan shall be documented and justification for deviations noted.”

The facility said there were no deviations from the staffing plan during the review period by selecting NA on the PAQ.

Warden Interview – The Warden said the facility was approved an increase by an outside organization that conducted a staffing analysis. She reviews staffing on a regularly and looks at recommendations from the incident reviews.

PCM Interview – The PCM stated there were no situations where a mandatory post

was closed due to a staff shortage. Discretionary posts may be closed if they cannot be filled due to staff absences. He said there were no deviations from the staffing plan in the review period.

c) Document Review – A memorandum from the SCCC Chief of Custody to the SCCC PREA Coordinator (PREA Compliance Manager) with subject “Staffing Plan” was provided as the SCCC staffing plan. The memorandum did not document a review per the standard. The 2022 Facility Annual Report was provided for review. A review of the staffing plan was not described in the report.

CORRECTIVE ACTION REQUIRED: The facility must develop a staffing plan and review the plan based on the requirements of the standard.

Corrective Action Completed: A staffing plan was documented in a Master Post Listing, CO I Staffing Dashboard Report, Facility Organizational Chart, and an Institutional Staff Roster and provided with a review. The review of the staffing plan was completed and documented in a Facility Staffing Plan Review document that was completed by the PREA Site Coordinator (PCM) and sent to the PREA Unit Manager (PREA Coordinator) for MODOC for review. The review covered thirteen factors that are required in substandard (a) and (c). the review was signed by the Major, PREA Site Coordinator and Warden.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each institution shall ensure the classifications of lieutenant or above conduct and document unscheduled and unannounced rounds to identify and deter offender sexual abuse and sexual harassment. Each facility shall ensure that rounds occur periodically in all areas of the facility. Staff members shall be prohibited from alerting other staff members that these rounds are occurring. The rounds shall be documented and readily accessible during audits as outlined in the facility's standard operating procedure.” The policy reflects the requirements for this provision of the standard.

Document review – Several shift rosters were provided for review. This auditor requested shift rosters for the 2nd day in four months during the review period. All rosters documented PREA unannounced rounds being conducted by shift supervisors in several areas of the facility on each shift. During the tour, housing unit logs were checked for unannounced rounds and verified that shift supervisors are documented when they make rounds.

Intermediate Staff – A Captain that is a shift supervisor said he conducts unannounced rounds on his shift. He makes rounds in some of the housing units and other areas. These rounds are documented in the shift summary and in the housing unit logs. He said he is random in where he goes so staff will not be able to warn other staff. If staff were found to be warning other staff he was making rounds, he would counsel staff on the policy.

Inmate Interviews – Inmates reported seeing shift supervisors, Captains and Lieutenants, making rounds in their housing unit several times a week.

	<p>CORRECTIVE ACTION REQUIRED: The facility must provide documentation of a staffing plan and review the plan based on the requirements of the standard.</p> <p>Corrective Action Completed: A staffing plan was documented in a Master Post Listing, CO I Staffing Dashboard Report, Facility Organizational Chart, and an Institutional Staff Roster and provided with a review. The review of the staffing plan was completed and documented in a Facility Staffing Plan Review document that was completed by the PREA Site Coordinator (PCM) and sent to the PREA Unit Manager (PREA Coordinator) for MODOC for review. The review covered thirteen factors that are required in substandard (a) and (c). the review was signed by the Major, PREA Site Coordinator and Warden.</p> <p>CORRECTIVE ACTION REQUIRED: Install locks on four staff bathrooms to enable locking the doors at all times and still provide staff access.</p> <p>Corrective Action Completed: Locks were installed on the bathrooms identified as being a potential blind spot. Photos of the doors with new key locks were provided for proof of completion.</p>
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115.14	Youthful inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>A memorandum from the PCM was provided that states South Central Correctional Center does not house youthful inmates. It was reported on the PAQ that SCCC does not house youthful inmates. None of the inmates interviewed were under 18 years of age.</p>

115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri Department of Corrections policy IS20-1.3 Searches prohibits cross gender strip searches except in exigent circumstances. Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment also prohibits cross-gender strip searches except in exigent circumstances. The facility reported on the PAQ that no cross gender strip searches occurred in in the past 12 months. The policies reflect the requirements of the provision of this standard.</p> <p>c) Missouri DOC policy IS20-1.3 Searches requires staff to document all cross gender strip searches on the cross gender search form. There were no cross gender</p>

strip search forms presented for review. The policy reflects the requirements for this provision of the standard.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with, institutional services, and probation and parole procedures regarding searches." The policy also requires staff of the opposite gender to announce their presence prior to entering a housing unit. These announcements are to be logged in the housing unit chronological log. The policy reflects the requirements for this provision of the standard.

Tour Observation - All housing units were toured and showers were observed with shower curtains or half doors that block the view of an inmate's genitals and buttocks but does not create a blind spot for staff. All toilets were inside of cells and faced away from the cell door. Inmates had the option to stand at the side of the toilet with their back to the cell door or use a towel on their lap if a female staff was present in the unit. Announcements were observed being made for female staff when entering a wing. Announcements were observed in the housing unit log.

Random Staff Interviews - All staff said an announcement for opposite gender staff is required when they are entering a housing unit. The announcement is made over a PA system that is broadcast on every wing and in the inmate's cells.

Inmate Interviews - Most inmates said they could shower without female staff seeing them in a state of undress. Some inmates said female staff would see them while using the toilet if they looked in the cell door window while they were using the toilet. They wanted to block the window in the door, but staff would not allow it. It was pointed out they could face away from the door or cover their up while sitting on the toilet. Most agreed they could do this when female staff were present.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall not perform strip or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, diagnostic center reception and orientation, and receiving screening intake center." Missouri DOC policy IS20-1.3 Searches prohibits staff from performing a strip search for the sole purpose of determining an inmate's gender. The policies reflect the requirements of the provision of this standard.

Random Staff Interview - staff said they could not strip search a transgender inmate for the sole purpose of determining their genital status. Strip searches would only be conducted when required for security purposes.

Transgender Inmate Interview - Transgender inmates said they did not think they had been strip searched for the sole purpose of determining their genital status. They have been strip searched for the same reasons as other inmates.

	<p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Custody staff members shall be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs.” The policy reflects the requirements for this provision of the standard.</p> <p>Random Staff Interview – Staff said they had received training on how to conduct cross gender pat searches and transgender inmate searches. At SCC, transgender inmates would be searched as a female inmate if the inmate requested it.</p> <p>Inmate Interviews – Some inmates said female staff had conducted a pat search on them. They said the search was appropriate and was not intrusive.</p> <p>The facility meets the provisions of this standard based on the information from interviews, tour observations, documents and policies reviewed.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires staff to “provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” LEP inmates will be provided the PREA video transcript and PREA brochure in their native language. If these cannot be translated into their native language, the PREA site coordinator will utilize an interpreter to assist the inmate in understanding the material. “Offender interpreters shall not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.”</p> <p>Intake Staff Interview – The staff that provide the PREA education was interviewed and asked how they provide accommodations for inmates with disabilities or LEP to ensure the inmates can understand the information being provided about reporting sexual abuse. He said the material is read to the inmates to accommodate those that cannot read or have visual impairment. The material is also provided in writing for those with hearing impairment. For LEP inmates, he provides the written materials in their language or uses an interpretive service. However, he wasn’t sure how to access that service.</p> <p>Risk Assessment Staff - The staff that conduct the risk assessment was interviewed and asked how they provide accommodations for inmates with disabilities or LEP to</p>

ensure the inmates can understand and answer the questions asked to complete the assessment. She asks the questions in an interview and would provide them in writing for hearing impairment. She was not sure if there was an interpretive service she could use for an LEP inmate.

LEP Inmate Interviews – Three inmates identified by the facility as LEP were interviewed. Two of the inmates were functional in English and capable of communicating in English for the interview without an interpreter. The third inmate could not speak English and required an interpreter. There were no staff interpreters available and the facility could not provide an interpretive service for the interview. The interview was conducted via google translate on the auditor's equipment. The LEP inmate said he was not provided an interpreter to talk to staff for assessment or PREA education. He was given the PREA brochure in Spanish and knew how to report on the phone or write in Spanish. There were no inmates with disabilities that would limit their ability to understand the questions asked for the assessment or the information provided at the PREA education.

Document Review - The PREA brochure was provided in several languages: Spanish, Russian, Croatia-Serbo, Chinese, Japanese, Vietnamese. There was also a large print version for visual impairment.

Tour Observations – PREA information posters in Spanish were seen throughout the facility.

Random Staff Interviews – All staff said they would not use an inmate to interpret for an LEP inmate that was trying to tell them about an incident of sexual abuse or sexual harassment. Most were not aware of an interpretive service for communicating with LEP inmates. They guessed there might be one.

CORRECTIVE ACTION REQUIRED: Staff in general are not sure if there are interpretive services available to aid in effective communication with inmates that are LEP for both providing information about reporting sexual abuse or sexual harassment and completing an accurate risk assessment. The facility must have access to an interpretive service and the information for accessing the service must be provided to all shift supervisors and staff that provide PREA education and risk screening. In general, all facility staff should be informed of the interpretive service and who can access it. The risk assessment and PREA education must be provided with an interpreter service to the LEP inmate that was not provided an interpreter at intake.

Corrective Action Completed: An email was sent to all SCCC staff notifying them that interpretive services are available for LEP inmates and the staff they must contact to access the services. The inmate that was not provided an interpreter when he arrived was provided the PREA education again with the use of an interpreter service. The paid bill to the interpreter service and emails with the service were provided along with the new risk assessment and PREA education acknowledgement form in Spanish..

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall not hire or promote any person, staff member, or enlist the services of any contractor that may have contact with an offender when it is known that he: a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or c. has been civilly or administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse."</p> <p>Document review – The records for ten staff hired in the prior 12 months was requested for review. Criminal background checks were provided for all ten staff that were clear of any charges that would not meet the standard.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background screening, candidate selection, maintenance of employee records, employee discipline, and labor organizations."</p> <p>Human Resource staff Interview – HR staff said employment background checks are completed for all new hires and promotions that reviews prior discipline issues that would include sexual harassment. Issues with sexual harassment history would be considered in hiring and promotion decisions.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Before hiring new staff members a worksite personnel staff member or designee shall: a. perform a criminal background records check; and b. attempt to contact all prior institutional employers, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background screening."</p> <p>Human Resources Staff Interview – HR staff said a criminal background check is completed for all new staff hired. If the applicant has previously worked for a correctional institution, a Pre-Employment PREA Check is completed by contacting the prior employer to ask if there were any substantiated sexual abuse investigations or resignations during a pending investigation of sexual abuse allegations.</p> <p>Document Review – Ten staff hired in the last 12 months were selected for record review. All ten had a criminal background check completed prior to their hire date.</p>

One had former employment with a correction institution. A Pre-Employment PREA Check was completed and documented.

d) Missouri DOC policy D2-2.2 Background Investigations states "Contract staff members, volunteers, and student interns shall have a background investigation conducted that consists of the criminal history check and any violations that have been reported to pertinent professional licensing and/or certification organizations if applicable."

Document Review – Twelve contract staff were selected for review of criminal background checks. All twelve had a criminal background check completed during the last 12 months.

e) Human Resources Staff Interview – HR staff said criminal background checks are completed annually during the birth month for MODOC staff and contract staff.

Human Resource Staff Interview – HR staff said she requests a criminal background check be completed on staff annually during their birth month. A criminal background check for contract staff is also completed annually during the birth month.

f) Human Resource Staff Interview – HR staff said new hire staff and staff applying for promotions are asked questions about (a) 1-3 of this standard on applications for employment. Staff are not required to complete a self-evaluation annually and are not asked these questions again. Contract staff are asked the required questions on an Application for Facility Access form or a PREA-Contracted Staff form.

Document Review - Twelve contract staff were randomly selected for review of documentation of the required questions being asked for this standard.

Documentation was provided for all twelve but only six answered all of the questions required by the standard. The first question on the forms asks if the contract staff has ever previously or currently worked at a correctional institution. The instructions appear to tell them to complete the following if the answer is Yes. If no was chosen, the contract staff did not complete the rest of the form and did not answer the remaining questions about (a) 1-3 of this standard.

CORRECTIVE ACTION REQUIRED: Ten new hire staff were selected at random from a list of new hires in the last 12 months for record review. The applications with the required questions for (a) 1-3 were provided at the interim report completion. Two had no date and one had no questions for (a) 1-3 on the application. The applications or other documentation asking the required questions for the selected staff must be submitted and reviewed.

g) Missouri DOC policy D2-2.2 Background Investigations states "False information regarding substantiated allegations of offender or resident abuse and/or harassment on the employment application shall be grounds for termination."

h) Human Resource Staff Interview – HR staff said if another correctional

	<p>institution contacts the Missouri DOC to inquire about substantiated allegations of sexual abuse or resignations during investigations of a former employee, they will provide information on the substantiated sexual abuse or resignations.</p> <p>CORRECTIVE ACTION REQUIRED: Three new hire staff applications with the required questions for (a) 1-3 have not been provided for review as of this report. The applications or other documentation asking the required questions for the selected staff must be submitted for review.</p> <p>Corrective Action Completed: The applications for the three staff that contained the questions pertaining to substandard (a) 1-3 were provided and reviewed. All of the recently hired staff selected for review were asked questions on their employment applications that meet the requirements of substandard (f).</p>
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115.18	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) The facility reported on the PAQ no substantial expansion or modification since the last PREA audit.</p> <p>Agency Head Interview – The Director said the agency designs expansion and modifications to maximize the agency’s ability to protect inmates.</p> <p>Warden Interview – The Warden said there have been no expansion or modifications since the last PREA audit. If there are any, improving inmate monitoring would be considered in the design.</p> <p>b) The facility reported on the PAQ no installation or update to the video monitoring system since the last audit.</p> <p>Agency Head Interview – The Director said when the agency installs or updates video monitoring technology, enhancing the ability to protect inmates is considered by focusing on blind spots.</p> <p>Warden Interview – The Warden said SCCC has not had any significant expansion, modification of the facility or improvements to the video monitoring system. They are hoping to get an update to the cameras and will look to improve monitoring for inmate safety.</p>

115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Exceeds Standard</p>

Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment." The policy also instructs staff to take steps to protect evidence. This may include instructing the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom. If possible, staff should not allow the inmate perpetrator to destroy evidence by preventing showering, changing clothes, eating, drinking, or using the bathroom.

Random Staff Interviews – If an inmate reported a sexual assault, all staff said they would ask the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom until the inmate gets a forensic exam or they are relieved. Staff would ensure the alleged inmate perpetrator would not destroy evidence in the same way. All said they would protect evidence at the scene until it could be collected by investigators.

b) MODOC policy D1-8.13 provides a time frame of 72 hours for possible collection of forensic evidence the same as found in the National Protocol for Sexual Assault Medical Forensic Examinations.

c) MODOC policy D1-8.13 requires the facility health services staff to contact the on-call SANE staff member if the alleged incident occurred within 72 hours. The policy states "The SANE staff member shall collect evidence according to established forensic procedures for processing and document the exam and finding in the applicable department computer system." "If the alleged perpetrator is a staff member, the victim shall be transported to the community emergency room for a sexual assault examination to be performed by a SANE or SAFE." If the alleged perpetrator is an inmate, the shift supervisor shall contact the on call SANE staff member and hold the victim in medical until the SANE staff arrive. The facility reported 4 forensic exams conducted in the past 12 months. All 4 were conducted at the facility by the SANE staff in medical. The facility exceeds this standard by having a program of SANE staff at the facility to provide forensic exams at the facility. This prevents the need to transport an inmate several hours to a hospital.

SANE Staff Interview – An SCCC facility nurse said she is on-call for central and eastern MODOC facilities along with four other SANE staff. She is certified as a forensic exam nurse. She said the forensic exam can be conducted from 72 hours up to 96 hours depending on the type of sexual abuse that occurred and if the person washed, showered, changed clothes, went to the bathroom, or had anything to eat or drink. There are several nurses trained as SANE in the Missouri DOC that can provide services to inmates at a MODOC facility.

d-e) The MODOC does not have an agreement with a victim advocate organization. Due to the lack of local rape crisis centers in the area of SCCC, the facility has two staff and a qualified community based staff that have attended victim advocate training provided by the Missouri Coalition Against Domestic Violence to qualify them

	<p>to provide victim advocate services for inmates at SCCC. The certificates for completion of the training were provided for all three.</p> <p>Victim Advocate Interview – One of the victim advocate qualified staff said he completed a 4 hour online training provided by MCADV. He is notified by the shift supervisor if there is an incident of sexual abuse reported and will report to the facility during off hours. He said the training covered trauma informed care and covered the process of the forensic examination. Conversations with the victim are confidential unless there is information provided that is a safety or security concern. If a victim goes to a local hospital for a forensic exam, he will go there to provide victim advocate services. He also provides victim advocate services for the victim during investigator interviews if requested.</p> <p>PCM Interview – The staff designated as the Site PREA Coordinator (PCM) said SCCC is in an area of the state where there are no local rape crisis centers to attempt to have an agreement with for victim advocate services. As a result, staff at the facility were sent to training provided by MCADV so they would be a qualified staff victim advocate. The staff victim advocates are on-call and can provide victim advocate services at forensic examinations and investigator interviews if the victim requests it.</p> <p>Document Review – Twenty-one sexual abuse investigations were reviewed. A forensic exam was conducted for three incidents of sexual abuse. All examinations were performed by the SANE staff at SCCC and documented. The victim was offered a victim advocate at the beginning of investigator interviews and at the time of the forensic exams.</p> <p>Interviews – Four inmates that reported sexual abuse at SCCC were interviewed. None of them received a SANE exam due to the time frame or they refused the examination.</p> <p>h) Training Certificates were provided for all staff designated as qualified victim advocate staff.</p> <p>The facility exceeds the provisions of this standard based on the interviews, documents and policies reviewed.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” The facility reported 40 allegations of sexual abuse and sexual</p>

	<p>harassment in the past 12 months with 10 resulting in administrative investigations and 30 referred for criminal investigations on the PAQ. There were 25 completed investigations provided for review. Twenty were for sexual abuse and five were for sexual harassment. Allegations of sexual harassment are investigated by a facility investigator. All allegations of sexual abuse are investigated by an investigator from the PREA Unit.</p> <p>Agency Head Interview – The Director of the Office of Professional Standards was the Agency Head designee for interview and is responsible for the PREA Unit in the office of Professional Standards. He said investigations are completed for all allegations of sexual abuse and sexual harassment in all facilities. The PREA Unit conducts investigations of sexual abuse allegations and the Institutional Investigators conduct investigations of sexual harassment.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” This policy was found posted on the Prison Rape Elimination Act page of the Missouri DOC website at https://doc.mo.gov/programs/PREA. Policy D1-8.4 Institutional Investigations covers requirements for investigations in general. The policy is identified as confidential, therefore it cannot be posted on the MODOC website.</p> <p>Investigator Interview – Both the Institutional and PREA Unit Investigators were interviewed. The Institutional Investigator said PREA reports are referred for investigation using the PREA Allegation Notification Checklist. If the allegation is sexual harassment it stays with the Institutional Investigator. If it is sexual abuse it is referred to the PREA Unit Investigator. The PREA Unit Investigator said she is contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Document Review – The review of the 25 investigations found the PREA Allegation Notification Checklist was completed in most cases by security staff that received the report. Some investigations began from information discovered in another investigation. All investigations reviewed were properly referred to an investigator with the authority to conduct an administrative or criminal investigation.</p> <p>The facility meets the provisions of this standard based on the information from interview, documents and policies reviewed.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall receive initial PREA training during the department's basic training."

Staff Interviews - All staff said they had received the PREA Basic training at the academy. Staff that have been working for MODOC for more than two years said they have completed the PREA Refresher training. All staff were knowledgeable about all of the topics except the mandatory reporting. All staff reported receiving information about PREA in the years they did not complete the PREA Refresher.

PREA Basic Training Curriculum - The PREA Basic training curriculum was provided for review. It covers the zero tolerance policy of MODOC; staff responsibilities in prevention, detection, reporting and response procedures; inmate's rights to be free of sexual abuse, sexual harassment and retaliation; staff rights to be free from retaliation; dynamics of sexual abuse; reactions of victims; how to detect signs of sexual abuse; avoiding inappropriate relationships with inmates; and mandatory reporting laws. The curriculum did not cover professional communication with LGBTI inmates. However, The Professional Boundaries lesson plan was provided for review that provides staff information on how to communicate effectively and professionally with LGBTI inmates. This training is all provided at the Basic Academy in a pre-service training for new hires.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the time of assignment."

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. Years in which an employee is not required to complete training, the facility site coordinator shall provide refresher information on current sexual abuse and sexual harassment policies."

PREA Refresher #1-12 - After the PREA Basic is completed at academy, staff are required to complete a PREA Refresher training modules every two years. These modules were reviewed and found they did not cover the required topic in (a) 10 mandatory reporting for victims under 18 and vulnerable adults. Topics (a) 1-9 are covered in the refresher training.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All completed PREA training requires a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed the training. This form must be routed through the facility training officer or regional training coordinator."

Document Review - Training records for ten staff hired in the past 12 months were reviewed. All ten received the PREA Basic training after hire. Records for eleven

	<p>current staff were reviewed for PREA Refresher training completion. All eleven had completed the PREA Refresher training less than two years ago.</p> <p>CORRECTIVE ACTION REQUIRED: Information must be added to the bi-annual refresher training that covers mandatory reporting laws for victims under 18 or vulnerable adults. The revised curriculum will be provided for review.</p> <p>Corrective Action Completed: The training curriculum for the PREA Refresher training was updated with information pertaining to the mandatory reporting laws that require the facility to contact the Missouri Department of Social Services-Children's Division for inmates under 18 that are a victim of sexual abuse or the Department of Health and Senior Services for inmate victims of sexual abuse that are vulnerable adults. The training curriculum update was sent via email to all SCCC staff and will be included in the revised curriculum for future training.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All part-time employees, volunteers, and contract staff members shall receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training."</p> <p>Training Curriculum - The PREA training curriculum for volunteers and contractors was provided for review. The curriculum provides volunteer and contract staff with the MODOC zero-tolerance policy, rights of inmates, signs of sexual abuse, MODOC's response process, dynamics of sexual abuse, reactions of victims, and how to respond to a report of sexual abuse.</p> <p>Volunteer Interview - A volunteer and two contract staff were interviewed. All were knowledgeable of the zero tolerance policy, signs of sexual abuse, reactions of victims, and their responsibilities if they receive a report of sexual abuse.</p> <p>c) Document Review - PREA training records were requested for 12 contract staff and 3 volunteers. A PREA Training Acknowledgement was signed by contract staff and volunteers stating they received and understand the training. The records documented the completion of PREA training during the last 12 months.</p> <p>The facility meets the provisions of the standard based on information from interviews, documents and policies reviewed.</p>

115.33	Inmate education
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Auditor Overall Determination: Meets Standard**Auditor Discussion**

Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders." The policy requires the facility to have the PREA offender brochure in several recognized languages. If the brochure is not available in the inmate's language then an interpretive service will be utilized to provide the information. The PREA offender brochure was provided in seven additional languages. The policy also requires the facility to make PREA reporting information available or visible to all inmates through posters, the offender rulebook, tablets and the brochure. Policy requires the inmates to sign an acknowledgement receipt for viewing the video and receiving the PREA offender brochure.

Tour Observations – There was no PREA education that could be observed during the onsite audit. During the tour of the facility, this auditor observed PREA reporting information posters and phone number posted in every housing unit and in common areas such as the recreation building, dining hall, medical waiting area, canteen line area and program areas. The information was in English and Spanish and large print.

Document Review – PREA education documents were requested for 36 inmates. All 36 had signed an acknowledgment receipt documenting they received the PREA education within 30 days of arrival at the facility.

Inmate Interviews – Forty inmates were interviewed. Most said they could recall receiving the PREA reporting information and zero-tolerance policy. An LEP inmate said he was given the Spanish PREA brochure. There were no inmates interviewed that could not read. Some admitted to not paying attention to the orientation but saw the posters in the housing unit that told them how they could report sexual abuse and sexual harassment. An inmate with cognitive impairment said staff went over the information with him individually and was asked if he understood it.

Intake Staff Interview – Staff that provide the PREA education said newly arriving inmates are provided the PREA education at arrival prior to going to their housing unit. The PREA video is shown to them as a group and the PREA offender brochure is given to them. He explains the zero-tolerance policy and their rights to them while in the group. He provides them information about the staff trained as a victim advocate at the facility and that they can write to an outside organization. If he identifies an inmate with disabilities, he can read the material for visual impairment, provide written material and closed captioning for hearing impaired. If an LEP inmate speaks a language other than Spanish, he can utilize arrange an in-person interpreter or telephonic interpreter.

	The facility meets all provisions of this standard based on the interviews, documents and policies reviewed.
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators assigned to investigate offender sexual abuse allegations shall receive specialized PREA investigator training.” The policy reflects the provision’s requirement.</p> <p>Training Curriculum – The NIC PREA: Investigating Sexual Abuse in a Confinement Setting was reviewed by this auditor. The training covers the investigation standards, Miranda, Garrity, evidence collection, forensic examinations, interviewing techniques,, understanding the victim, and evidence requirements for substantiating administrative cases or for making a prosecutorial referral. The curriculum covered the requirements of the standard.</p> <p>Investigator Interview – A PREA Unit Investigator and SCCC Investigator were interviewed. The PREA Unit Investigator said she completed the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting and the advanced NIC investigations course. She also has completed sexual abuse investigation training through VAWA as well. The SCCC Investigator said she has completed the MODOC PREA investigation training.</p> <p>Document Review – NIC training certificates were provided for 12 investigators in the PREA Unit.</p> <p>The facility meets the provisions of the standard based on information from interviews, documents and policies reviewed.</p>

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Health services staff members shall receive specialized PREA medical and mental health training.”</p> <p>SANE Staff Interview – An SCCC facility nurse said she is on-call SANE for central and</p>

	<p>eastern MODOC facilities along with four other SANE staff. She is certified as a forensic exam nurse. She said she also has completed the specialized medical training through Centurian in addition to the PREA training for contract staff. The training covered how to detect and assess signs of sexual abuse, how to preserve evidence, how to respond to victims, responsibilities for handling a report of sexual abuse. The training is completed online.</p> <p>Medical Staff Interview – The Director of Nursing said she completes an online specialized medical training through Centurian. The training covered how to detect and assess signs of sexual abuse, how to preserve evidence, how to respond to victims, responsibilities for handling a report of sexual abuse.</p> <p>Mental Health Staff Interview – A mental health staff said he has completed the specialized medical training through Centurian online annually. The training covered how to detect and assess signs of sexual abuse, how to preserve evidence, how to respond to victims, responsibilities for handling a report of sexual abuse and duty to report information about sexual abuse in a correctional institution.</p> <p>Document Review – Nine medical and mental health staff were randomly selected from the list of medical and mental health staff for review of training documentation. Documentation of specialized medical training for the six medical staff was provided. However, documentation for the PREA training all staff are required to complete was not provided. Documentation of PREA training was provided for the three mental health staff, however documentation of the specialized medical training was not provided for review.</p> <p>Corrective Action Required: Provide the specialized medical training for three mental health staff and documentation of the PREA training for six medical staff.</p> <p>Corrective Action Completed: Documentation of PREA Refresher training was provided for six medical staff. Five of the medical staff had completed the training more than two years ago and had to retake the training to meet the standard. Documentation of training completion during the corrective action period was provide for the five medical staff. Specialized medical training completion documents were provided for the three mental health staff completing the corrections for this standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All offenders shall be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding</p>

offender housing assignments, transgender and intersex offenders and the probation and parole procedures regarding housing assignments, transgender and intersex clients, and contracted residential facilities.” The policy requires an assessment for risk of victimization and abusiveness.

Risk Screening Staff Interview – The staff said the risk assessment results from the last facility are used for bed assignment, then a new assessment is completed 24 to 48 hours after an inmate arrives at the facility.

Inmate Interviews – Inmates that arrived at the facility in the last year recalled being asked questions about prior victimization, sexual orientation, gender identity, disabilities, and prior abusiveness for the assessment in the first day they arrived.

Some only remembered being asked about prior victimization. Some Inmates that have been at SCCC for several years could not recall being asked these questions at arrival.

b) Missouri DOC policy IS5-2.3 Offender Internal Classification states “CCMs will conduct a new internal classification within the first 72 hours at that facility and the offender will be housed in accordance with the new internal classification score.” The policy requires a new risk assessment to be completed within 72 hours of arrival at the facility.

Document Review – Initial risk assessments and arrival dates for 35 inmates were reviewed. Initial assessments were completed less than 72 hours of arrival for all 35 inmates.

c) Missouri DOC policy IS5-2.3 Offender Internal Classification states “Facilities shall assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities.” The risk assessment was provided for review. The factors in the assessment were found to be objective.

d) Risk Screening Staff Interview – The staff said they ask the inmates questions about prior victimization, sexual orientation, gender identity, disabilities, prior sexual abuse, and prior criminal history in a private meeting with each inmate. The remaining factors on the screening instrument are assessed from information in the inmate criminal record and conduct record.

Document Review – The Internal Classification Risk Assessment was reviewed and found to assess risk of victimization for the following factors: disabilities, age, inmate build, prior incarceration, prior conviction for sex offense with a Child victim, LGBTI or Gender non-conforming, prior victim of sexual abuse, and perception of vulnerability.

Inmates are not detained solely for civil immigration in the MODOC. The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet this provision of the standard.

e) Document Review - The Internal Classification Risk Assessment was reviewed and found to assess risk of abusiveness for the following factors: prior sexual abuse - prior conviction for sex offense with Adult victims; prior convictions for violent offenses - prior convictions for violent crimes; history of prior institutional violence or sexual abuse - conduct for violent offenses past 10 years and conduct violation for murder or forcible sexual conduct older than 5 yrs but less than 10 yrs. Though there is assessment for prior sexual abuse involving adults, not assessing for sex offenses with child victims does not assess for any or all prior sexual abuse. This does not meet the standard.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be reassessed within 30 days of arrival. The reassessment shall consider additional relevant information received by the facility after the initial intake screening."

Risk Screening Staff Interview - The staff said they complete a reassessment at 29 or 30 days from the inmate's arrival at the facility. She said she asks the inmate the same questions again and reviews the inmate record for new information to complete another assessment.

Inmate Interviews - Some inmates said they were not asked questions about being a prior victim or sexual orientation and gender identity a second time. Some did recall being asked these questions again around a month after arrival.

Document Review - Reassessments for 35 inmates were reviewed. Eight of the reassessments were completed over 30 days after the inmate's arrival date. Most of the late reassessments were due to completing the reassessment on the same day of the month, but the inmate arrived in a month with 31 days. This caused the reassessment to be a day over 30 days. It is recommended not to wait until the 30th day to complete the reassessments. This increases the chances they are late due to the unforeseen absence of staff completing them. Also, staff should not complete the reassessment on the same day of the month of the arrival as there are several 31 days months on the calendar. The standard is not being followed at times and assessments will need to be reviewed during a corrective action for completion during proper time frames.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender's risk level shall be reassessed when warranted due to a referral, incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness."

Risk Screening Staff Interview - The staff said if an inmate is a victim or perpetrator in a substantiated incident of sexual abuse at the facility, a reassessment would be completed.

h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender shall not be disciplined for refusing to answer or not disclosing complete information during the assessment."

Risk Screening Staff Interview – The staff said inmates do not have to answer the questions during the risk assessment interview. If they refuse, they cannot be disciplined.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The chief administrative officer (CAO) or PREA site coordinator shall control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders.”

PREA Coordinator Interview – The PREA Coordinator said information obtained for the risk assessment is confidential and access to the electronic system the assessments are completed in is controlled and limited to the staff that need to complete assessments and the staff involved in reviewing them.

PREA Compliance Manager – The Assistant Warden said access to the internal classification risk assessment is limited to the staff at the facility that complete the assessments and staff that supervise the staff completing assessments or review the assessments.

Risk Screening Staff Interview – The staff said all information obtained from the inmate interview and inmate record to complete an internal risk assessment is confidential and limited to authorized staff.

CORRECTIVE ACTION REQUIRED: The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet provision (d). There is assessment for prior sexual abuse involving adults, not assessing for sex offenses with child victims does not assess for any or all prior sexual abuse. This does not meet provision (e). Some reassessments were found to be completed beyond 30 days. Provision (f) is not being followed at times and assessments will need to be reviewed for completion within proper time frames. The internal classification risk assessment must be modified to meet provision (d) and (e). Once the modification is approved, completed assessments must be provided for review of use within required time frames in the standard.

Corrective Action Completed: The MODOC PREA Coordinator and Director of Office of Professional Standards said the risk assessment is completed in an electronic computer system that will take more time to modify than is allowed in the corrective action period. As a result, an agreed upon corrective action was developed. The process to complete the assessment was modified by using comment sections in the current assessment to document changes in what is being assessed on specific factors until the MODOC can make permanent changes to the assessment in the electronic system. There were changes to five factors being assessed on the current assessment that had been identified as not meeting the standard.

· Adult victim was added to victimization question 14 for prior sex offense convictions. A comment will be added for scoring Adult victim in addition to the current Child victim.

	<ul style="list-style-type: none"> Exclusively non-violent criminal history factor in the victimization section will be scored as an override when the answer is No to question 17 in the risk of abusiveness section that scores convictions for crimes of violence. If the answer is No and the victimization section score is 2 points, the staff will complete an override to a Sigma (risk of victimization) in number 20 for the inmate having a non-violent criminal history. Non-violent criminal history will be placed in the comment section. Child victim was added to risk of abusiveness question 16 in addition to Adult victim. The comment Child Victim is added if the answer is Yes and the victim is a child. Staff were instructed not to follow the time limitations on questions 18 and 19. A Yes response will be given for any institutional conduct history for violence or sexual abuse with comments added to document the information being outside of the time frames. <p>The changes were added to the training manual for the risk assessment and training was provided to the staff that complete risk assessments at the facility on August 5, 2024 by the PREA Unit Manager. The new assessment process was put in place at SCCC following the training. Intake assessments and reassessments completed during August and September were provided for review each week. A total sample of twenty intake assessments and twenty reassessments were reviewed for use of the new process. All were completed in the correct time frames and using the new process for scoring. The MODOC will continue to work toward changes in the electronic risk assessment that makes these changes permanent.</p>
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115.42 Use of screening information	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This shall be in accordance with the institutional services procedures regarding offender housing assignments, transgender and intersex offenders, offender recreation and activities, and probation and parole procedures regarding community supervision centers, the community release center, and contracted residential facilities."</p> <p>Missouri DOC policy IS5-2.3 Offender Internal Classification states "The department utilizes an internal classification system to assist department staff members in determining appropriate housing, programs, and work assignments of offenders to ensure offender safety, institutional security, and compliance with the Prison Rape Elimination Act (PREA) guidelines." This policy provides the procedures for</p>

completing the PREA risk assessment. The risk assessment is used to guide the placement of inmates in housing assignments and programs. Inmates that are high risk of victimization (Sigma) are not housed in the same cell with inmates that are high risk of abusiveness (Alpha). The facility has a housing assignment report with the internal classification identified on the report. This allows staff to monitor placement based on Sigma, Alpha or Kappa (no risk). The PREA Site Coordinator said this is audited monthly to ensure proper placement.

b) Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive.

c) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee is responsible for determining a permanent housing assignment for each transgender or intersex offender, and prior to this assignment shall meet with each offender to determine his vulnerability within the general population and length of time living as the acquired gender. Transgender and intersex housing assignments shall not be made based solely on genitalia but must consider the offender’s health and safety and the security of the facility through a review of the respective classification, medical and mental health records.”

Missouri DOC policy IS5-3.3 Transgender and Intersex Offenders provides the process for review of an offender that has identified as transgender or intersex at the risk assessment. The staff that conduct the risk assessment notify the PREA Site Coordinator of the transgender or intersex identification. The Transgender Committee is consists of the PREA Site Coordinator, medical administrator, mental health chief, medical director. The Transgender Committee has an initial meeting with the offender. The offender then meets with Mental Health to be reviewed for gender affirming items, hormone therapy treatment consideration, and discuss health and safety concerns. The Transgender Committee completes the Transgender Committee Review form and forwards it to the Transgender Review Team in central administration. The Transgender Review Team consists of the PREA Coordinator, deputy division director, director of rehabilitative services.

PREA Compliance Manager Interview – The Facility has a Transgender Committee that meets with an inmate that identifies as transgender during the intake risk assessment screening. The meeting occurs within 10 working days of arrival or the inmate identifying as transgender. The Mental Health supervisor will conduct a review by meeting with the transgender inmate. The Mental Health supervisor asks the inmate about views of safety and vulnerability and provides that information to the committee. The Transgender Committee makes recommendations on facility housing placement, programs, gender affirming items, and mental health needs. The recommendations are documented on the Transgender Committee Review form and sent to the Transgender Review Team in central administration.

Transgender Inmate Interviews – Three inmates that identified to the facility staff as transgender said they met with the Transgender Committee shortly after they

identified as transgender at the intake assessment screening. They all said they were asked about their views of vulnerability and safety, facility housing assignment, gender affirming items and showering.

Document Review – Transgender Review Committee documents were reviewed for the three transgender inmates. The reviews occurred less than a month after their arrival at the facility. The committee documents the offender’s views of vulnerability; showering accommodations; historical overview of transgender status; review of institutional adjustment; risk assessment review; PREA allegations or investigations; programming assignments; health care treatment status; special accommodations or request by inmate; security concerns raised by offender or staff. The committee then documents recommendations about facility housing assignments, shower accommodations, gender affirming items, and security accommodations. The form is then marked by an X for Approved “as is” or Approved with modifications by the Transgender Review Team. The process is a thorough review that gives serious consideration to the transgender inmates views of safety and vulnerability as well as administrative and security concerns.

d) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee shall meet with the offender within 10 working days of either the offender’s arrival to the facility or upon learning the offender’s transgender or intersex status and every 6 months thereafter.”

Risk Screening staff Interview – Staff that conduct risk screening said transgender inmates are reviewed for facility housing placement when they arrive and every 6 months after intake to review safety concerns with facility housing assignment, programs and work assignments.

Document Review – Transgender Committee Review forms were provided for all three transgender inmates. Two only had an initial review due to arriving less than 6 months ago. One identified to mental health long after transfer to the facility. There were Transgender Committee Reviews documented every six months.

Transgender Inmate Interviews – a transgender inmate that had been at the facility for over two years after identifying as transgender said the Transgender Review Committee has met with her every six months since identifying.

e) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee review shall include the following: (1) Offender’s view of his vulnerability.”

PREA Compliance Manager Interview – The Facility has a Transgender Committee that meets with an inmate that identifies as transgender during the intake risk assessment screening. The meeting occurs within 10 working days of arrival or the inmate identifying as transgender. The Mental Health supervisor will conduct a review by meeting with the transgender inmate. The Mental Health supervisor asks the inmate about views of safety and vulnerability and provides that information to the committee. The Offender’s view of their vulnerability are documented on the Transgender Committee Review form.

	<p>f) PREA Compliance Manager Interview – The Assistant Warden said inmates that identify as transgender can shower in single person shower stalls with curtains and additional curtains to the entrance of the shower area. They are also given the opportunity to shower at times when the other inmates are not out of their cells if they do not feel comfortable with other inmates being outside of the shower area.</p> <p>Tour Observations – the showers are in a small room that has a partial curtain covering the entrance to the room and partial curtains that cover the shower entrance. Some showers are off to the side of the entrance affording more privacy. Only one inmate is allowed in the shower room though there are two stalls in some. This would allow a transgender inmate to shower separate even when other inmates are using other showers. The transgender inmates interviewed were comfortable with the separate showers.</p> <p>g) Inmate Interviews – Six inmates that identified as transgender, gay or bisexual were interviewed. All said they did not think their housing assignment was based on their sexual orientation or gender identity and they are not in a housing unit dedicated to LGBTI inmates. Their placement is just like other inmates.</p> <p>The facility meets the provisions of this standard based on information from interviews, tour observations, documents and policies reviewed.</p>
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115.43 Protective Custody	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.”</p> <p>MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30 day review.</p> <p>Facility Head Interview – The Warden said if an inmate has been determined to be at very high risk of sexual abuse, the facility will review all housing options before considering placement in involuntary segregation. Any placement would be temporary until at alternative housing can be found. She said the facility has not had an involuntary placement in segregation from the risk assessment in the last year.</p>

	<p>Staff who Supervise Segregated Housing Interview – Staff that supervise segregated housing said all inmates in segregated housing have a restriction of privileges, programs, education and work opportunities. The reason for no alternative housing is documented on the PREA Notification Checklist form. If the inmate is in segregation for 30 days, he does a review to determine if there are alternative housing solutions.</p> <p>Inmate Interviews – the inmates that reported sexual abuse said they were not involuntarily placed in segregation.</p> <p>The facility reported on the PAQ there were no inmates placed in involuntary segregation in the last 12 months.</p> <p>The facility meets this standard based on the information from interviews and policies reviewed.</p>
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115.51	Inmate reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request (IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline, and d. advocacy agency.” The methods of reporting are communicated to inmates in the PREA offender brochure provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC, report to any staff, or calling the PREA hotline.</p> <p>Tour Observations – PREA reporting posters were observed in housing unit dayrooms, recreation areas, medical waiting areas, canteen waiting area, programs building hallways, and administration areas. The posters provided the PREA hotline number, Address to write the Department of Public Safety, and instructed inmates to tell any staff.</p> <p>Random Staff Interview – Staff were asked what ways inmates can privately report sexual abuse or sexual harassment. Staff said inmates can call the PREA hotline, write or tell any staff.</p> <p>Inmate Interview – inmates said they could privately report sexual abuse or sexual harassment by telling any staff, write staff by dropping a “kite” in the mailbox or call the PREA hotline. Most thought they could make an anonymous report by not putting their name on the written report and dropping it in the mailbox. Some were aware of the anonymous report to an external organization but didn’t remember the name. All</p>

inmates knew multiple ways they could make a report.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail and not subject to examination." The policy requires an external reporting method that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure.

PCM Interview - The PCM said inmates can report to the Department of Public Safety by writing. Their correspondence is treated as privileged and cannot be read or censored. The inmate can leave their name off of the envelope and correspondence if they want to remain anonymous. It will still be mailed out.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure."

Random Staff Interview - Staff said they are required to accept reports made verbally, in writing and from third parties. When they receive a verbal report, they are required to document that report and the steps they followed conveying the information as required in a written incident report. This report must be turned in immediately or prior to leaving the shift.

Inmate Interviews - inmates said they could privately report sexual abuse or sexual harassment by telling any staff, write staff by dropping a "kite" in the mailbox or call the PREA hotline.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct." The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.

Random Staff Interview - Staff said they could privately report information about sexual abuse or sexual harassment by filling out an IOC and sending it to their supervisor or calling the PREA hotline or the Ethics Line. Posters for the ethics line were observed in the custody shift change area where staff could easily see them. The PREA hotline is posted throughout the facility.

The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>b) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not impose a time limit on when an offender may submit a complaint regarding an allegation of offender sexual abuse.” “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.” “Nothing in this section shall restrict the agency’s ability to defend against an offender lawsuit on the ground that the applicable statute of limitations has expired.” The policy allows for any complaints regarding sexual abuse to bypass the informal process and proceed immediately to grievance stage.</p> <p>c) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.”</p> <p>d) Missouri DOC policy D5-3.2 Offender Grievance states “Offender grievances alleging sexual abuse shall be processed as follows: If determined to be a non-emergency the CAO or designee shall respond within 30 calendar days of receipt. Non-emergency offender grievance appeals alleging offender sexual abuse shall be processed as follows: a response shall be provided as soon as practical, but no later than 60 calendar days of receipt. Computation of the 60 day time period shall not include the days between the offender’s receipt of the offender grievance response and receipt of the offender grievance appeal by the offender grievance unit at central office. Appeals shall be referred to the deputy division director or designee. An extension of time to respond, of up to 70 calendar days, may be claimed if the normal time period for response is insufficient to make an appropriate decision. The offender shall be notified in writing of such extension and shall be provided a date by which a response shall be provided. During the administrative process, including the offender grievance appeal level, if the offender does not receive a response within the time allotted for a reply, including extension, the offender may proceed to the next level of the offender grievance process.” The facility reported seven grievances filed in the past 12 months that alleged sexual abuse on the pre-audit questionnaire. Three reached final decision within 90 days and there were none that required an extension. All three complaints were referred for investigation or under investigation at the time of the grievance being filed. Two resulted in completed sexual abuse investigations. One did not fit the definition of an incident of sexual abuse or sexual harassment and should have been processed as a normal grievance. All were provided with a response within required time frame that the allegation was being investigated.</p> <p>e) Missouri DOC policy D5-3.2 Offender Grievance states “Third Party Reporting: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, shall be permitted to assist offenders in filing requests for grievances or appeals relating to allegations of offender sexual abuse. This assistance</p>

	<p>cannot interfere with the safety and security of the institution. When a staff member receives the documentation from the reporting third party, it shall be attached to the grievance form and shall immediately be recorded in accordance with this procedure. A copy of the documentation shall also be forwarded to the CAO or designee in order to be attached to the possible investigation or inquiry. The CCM shall attempt to discuss the issue with the offender (victim) prior to developing a response to confirm if the alleged victim agrees to have the request filed on his behalf. If the offender declines to have the request processed on his behalf, the CCM shall document the offender's decision and the complaint shall be considered withdrawn for grievance purposes."</p> <p>Inmate Interviews – an inmate that reported sexual abuse on a grievance was interviewed. He said that an investigator came to see him not long after he filed the grievance. Documentation shows he was provided with a response within the time frame of the standard. The response was the allegation is under investigation.</p> <p>f) Missouri DOC policy D5-3.2 Offender Grievance states "If the CAO or the PREA site coordinator determines that the complaint meets the definition of a PREA emergency grievance, the grievance shall be addressed as follows: The CAO or designee shall prepare an initial response which shall be attached to the grievance and provided to the offender within 48 hours of receipt of the initial filing date. The offender shall sign and date the response. A final response from the CAO or designee shall be provided to the offender within 5 calendar days from the initial filing date. The offender shall sign and date the form. The initial and final response for the grievance shall document the department's determination whether the offender is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance." The facility reported on the pre-audit questionnaire there were no grievances alleging substantial risk of sexual abuse filed during the review period.</p> <p>g) The facility reported no disciplinary action against an inmate for filing a grievance alleging sexual abuse in the past 12 months.</p> <p>The facility meets this standard based on the information from interviews, documents and policies reviewed.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall offer alleged victims of offender sexual abuse, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, during the investigative process. When an allegation of sexual harassment is forwarded for investigation, the alleged victim of sexual</p>

harassment will be offered a victim advocate. Offenders shall be allowed to communicate with an advocate by mail or special visit in a confidential manner as possible to maintain safety and security of the institution.”

Inmate Interviews – Most inmates recalled staff mentioning victim advocate services at the PREA education. Some inmates said they have seen information about services for victims in the offender handbook. Most said they didn’t need the services, so they didn’t pay attention or remember the information.

Prior Victim and reported Sexual Abuse Inmate Interviews – Inmates that reported sexual abuse while at the facility were asked if victim advocate services were offered to them after they made a report. Victim advocate services were offered and refused. Inmates that reported being a prior victim of sexual abuse at risk assessment screening said they were offered victim advocate services. Some refused the offer and some were seen by mental health for services.

Victim Advocate Posters – Victim Advocate posters were observed in housing units on the facility tour. The posters provided the contact information to Just Detention International and the Rape, Abuse and Incest National Network. This auditor contacted Just Detention International and was informed they had not received any correspondence during the review period. The posters inform inmates that telephone calls are monitored and that mail to these organizations is confidential and not subject to examination.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before being given access to a victim advocate, the offenders shall be informed of the extent to which communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory reporting laws.”

Victim Advocate Posters – Victim Advocate posters were observed in housing units on the facility tour. The posters provided the contact information to Just Detention International and the Rape, Abuse and Incest National Network. This auditor contacted Just Detention International and was informed they had not received any correspondence during the review period. The posters inform inmates that telephone calls are monitored and that mail to these organizations is confidential and not subject to examination.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If a facility is unable to enter into a MOU with the advocacy center, the attempt shall be documented and advocacy services shall be provided by a qualified staff member.”

PCM Interview – The Site PREA Coordinator (PCM) said the facility has not been able to enter into an agreement or attempt to enter into an agreement with a local rape crisis center due to the remote location of the facility to any rape crisis centers. The facility has staff that have attended victim advocate training to be qualified victim advocate staff. These staff are on call and can provide victim advocate services to inmates at the forensic exam or at the investigator interview if requested.

	<p>PC Interview – The agency PREA Coordinator said he would be attempting to obtain a MOU with a statewide victim advocate organization in Missouri.</p> <p>Qualified Staff Victim Advocate Interview – A staff that provides victim advocate services to inmates at the forensic exam or the investigator interview said he completed the Missouri Coalition Against Domestic and Sexual Violence victim advocacy training. He said the training centers around victim trauma and provides information about the process of a forensic exam and the investigation process so he could answer questions from a victim.</p> <p>The facility meets the provisions of this standard based on information from interviews, tour observations, documents and policies reviewed.</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Facility Tour Observation– Posters were observed during the tour in the visiting room that provide visitors with information for reporting sexual abuse and sexual harassment to the PREA Unit of the Missouri DOC. The mailing address, email address and telephone number are on the poster. The poster informs family and friends that the MODOC has zero tolerance for sexual abuse and sexual harassment. The poster says “Friends, family or anyone outside of the facility may report sexual abuse or sexual harassment for an offender.”</p> <p>MODOC PREA Webpage – The Missouri DOC PREA webpage provides information under the Friends and Family section for reporting sexual abuse and sexual harassment by calling, writing or emailing. This was observed at https://doc.mo.gov/programs/PREA.</p> <p>Inmate Interviews – most inmates said they see information for reporting that their family or friends can use in the offender handbook. This information could be shared with their family so they can make a report for them.</p> <p>The facility meets the standard based on information from observations and interviews.</p>

115.61	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>

	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Failure to report offender sexual abuse is a Class A misdemeanor in accordance with Missouri state statute. All staff members, shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure."</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions."</p> <p>Staff Interviews – Staff said any information they are told by an inmate regarding an allegation of sexual abuse or sexual harassment is confidential and can only be shared with staff involved in the protection of the victim and investigation.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Medical and mental health staff members shall inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes."</p> <p>Medical and Mental Health staff interviews – the medical staff said inmates are informed during intake screening of their duty to report to investigators any information about a sexual abuse incident that occurred in a correctional institution.</p> <p>d) A search of the internet found reports of sexual abuse of a vulnerable adult must go to Adult Protective Services at the Department of Health and Senior Services.</p> <p>PCM Interview – the PCM said there have been no inmates that would be defined a vulnerable adult that have been a victim of sexual abuse during the review period. None were found in the investigation file review.</p> <p>e) Warden Interview – The Warden said that all allegations of sexual abuse are reported to the PREA Unit investigator and all allegations of sexual harassment are reported to the SCCC investigator, including third party and anonymous reports.</p> <p>Document Review – Twenty-five investigations were reviewed. Twenty-one allegations of sexual abuse were investigated by the PREA Unit investigators and 4 allegations of sexual harassment were investigated by the SCCC investigator.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, shall immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist.” The facility reported zero incidents of immanent risk of sexual abuse in the past 12 months.</p> <p>Agency Head Interview – The Division Director said the facility would immediately remove an offender from a situation that is a substantial risk of imminent sexual abuse. The facility could move the offender to another work, program, housing assignment or place the offender in protective custody and transfer to another facility.</p> <p>Warden Interview – The Warden said if an inmate is a substantial risk of imminent sexual abuse, they would immediately take measures to protect that inmate. This could be moving the threat, moving the inmate to another housing unit, protective custody or transfer if needed.</p> <p>Staff Interviews – Staff said they are required to immediately protect the inmate and notify the Shift Commander. They would not leave the inmate until someone takes custody of him.</p> <p>The facility meets the standard based on information from interviews and policies reviewed.</p>
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115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving an allegation that an offender was sexually abused while confined at a facility outside of the department, the CAO or designee or the appropriate office shall ensure the outside facility is notified of the allegation within 72 hours. The CAO or designee shall maintain documentation of the allegation received and when the outside facility was notified with the allegation.” The facility reported on the PAQ zero reports of sexual abuse by an inmate that occurred at another facility.</p> <p>Warden Interview – The Warden said If an inmate at SCCC reports allegation of an incident of sexual abuse that occurred at another facility, she will ensure the report is provided to that facility head within 72 hours. The report is documented and emailed to the facility.</p> <p>d) Warden Interview – The Warden said if she receives a report from an inmate at</p>

	<p>another facility for an alleged incident of sexual abuse that occurred at SCCC, she will initiate an investigation by sending the report to the PREA Unit.</p> <p>Document Review – Three investigations reviewed were initiated by a report from two other MODOC facilities and a parole office for sexual abuse that occurred at SCCC. An investigation was initiated after receiving the report.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “In the event of an allegation of a penetration act, the first responder shall take the following steps: (1) Ensure the safety of the victim. (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable. (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (4) The shift supervisor shall make telephone notifications and respond as outlined in the facility’s coordinated response to offender sexual abuse protocol.”</p> <p>Staff Interviews – Security Staff said if an inmate reports being sexually assaulted within the last 72 hours they would instruct the victim to not change clothes, shower, brush teeth, eat drink, or use the restroom in order to protect evidence from being destroyed. Non-security staff said they would instruct the victim to not change clothes, shower, brush teeth, eat drink, or use the restroom in order to protect evidence from being destroyed. They would then notify security staff, specifically the shift commander’s office.</p> <p>Document Review – There were twenty-one completed investigations of allegations of sexual abuse during the review period. In all twenty-one, staff first responders, both custody and non-custody, contacted the shift commander’s office or other custody staff. There were 4 allegations that potential evidence had to be protected. Two were in a time frame that allowed for a forensic examination to be conducted. The SANE Staff were notified immediately and the forensic examination was conducted the same day of the report.</p> <p>The facility meets the provisions of this standard based on the information from interviews, document and policy reviewed.</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review – The Coordinated Response to Offender Sexual Abuse was provided for review. This is SCCC’s institutional plan to coordinate staff actions in response to an incident of sexual abuse. The plan provides basic roles to staff first responders, medical and mental health staff, the Shift Commander, PREA Site Coordinator, victim advocate staff, and the Chief Administrative Officer or designee. The plan also covers staff response to allegations of penetration and non-penetration incidents.</p> <p>Warden Interview – The warden said the facility has a coordinated response plan for allegations of sexual assault and sexual abuse. The plan is specific to South Central Correctional Facility and tells staff what to do in response to allegations of sexual abuse. The plan tells the PREA Site Coordinator, Shift Commander, medical staff , mental health staff and advocates their role in different scenarios.</p> <p>The facility meets this standard based on information from the interview and plan reviewed.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>MDOC policy D2-11.6 Labor Organization states “Per the Prison Rape Elimination Act, the department shall not enter into or renew any collective bargaining agreements or other agreements that limit the department’s ability to remove alleged staff sexual abusers from contact with any offender or resident pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.”</p> <p>Agency Head Interview – The designee for the MODOC Director said the Missouri DOC does have an active bargaining unit agreement, but it does not limit the agency’s ability to remove staff alleged to have committed sexual abuse away from inmates during the investigation the same as other staff.</p> <p>PREA Coordinator Interview – The PREA Coordinator said the Missouri DOC has a collective bargaining agreement for staff, but it does not prevent the removal of staff from contact with an offender that alleged sexual abuse by the staff. He said the agreement may have expired and has not been renewed.</p>

115.67	Agency protection against retaliation
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1465 544">a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA site coordinator shall ensure victims, individuals who report sexual abuse, and those that cooperate with offender sexual abuse investigations are monitored and protected from retaliation.” The Assistant Warden is designated as the staff responsible for retaliation monitoring at SCCC.</p> <p data-bbox="256 577 1465 701">b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires the PREA Site Coordinator to offer emotional support services to offender victims, witnesses, reporters, staff reporters and staff witnesses.</p> <p data-bbox="256 734 1469 857">Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.</p> <p data-bbox="256 891 1469 1093">Warden Interview – The Warden said any suspected retaliation would be investigated. If there is suspected retaliation by an inmate against the victim, they can move the inmate to another housing unit or place them in segregation pending a transfer. If staff are suspected of retaliation, they can be reassigned away from the victim or suspended pending investigation.</p> <p data-bbox="256 1126 1469 1373">Staff designated with Retaliation Monitoring – The staff designated with retaliation monitoring said she is assigned monitoring with offenders in her housing unit. She meets with victims every 30 days for up to 90 days. She looks for conduct, housing assignment changes, job changes, program changes for possible retaliation in addition to asking the victim about suspected retaliation. She has not had a report of retaliation while monitoring.</p> <p data-bbox="256 1406 1437 1529">Inmates that reported sexual abuse – Four Inmates were interviewed that reported sexual abuse. All said they met with staff for retaliation monitoring about once per month. They couldn’t remember for how long.</p> <p data-bbox="256 1563 1465 1776">Inmate Monitoring Documents – Retaliation monitoring occurred in twenty-three investigations. In one case, it was documented on the retaliation monitoring form that the victim alleged retaliation was occurring, however there was no documentation on the form of protective measures or if the allegation was forwarded to anyone. No other suspected retaliation was documented.</p> <p data-bbox="256 1809 1469 2089">c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The alleged victim of offender sexual abuse shall be monitored for a minimum of 90 days to assess any potential risk or act of retaliation. The assessment-retaliation status checklist form shall be used during each of the assessment interviews. If the victim expresses fear of retaliation, monitoring shall continue for an additional 90 day period or until the victim or reporter is no longer in fear of retaliation or if the investigation is unfounded.”</p>

Warden Interview – The Warden said if there is suspected retaliation by an inmate against the victim, they can move the inmate to another housing unit or place them in segregation. If staff are suspected of retaliation, they can be reassigned away from the victim or suspended pending investigation. If staff think they are experiencing retaliation, they can report it to their supervisor, HR the AW or her.

Staff designated with Retaliation Monitoring – The staff designated with retaliation monitoring said she is assigned monitoring with offenders in her housing unit. She meets with victims every 30 days for up to 90 days. She looks for conduct, housing assignment changes, job changes, program changes for possible retaliation in addition to asking the victim about suspected retaliation. If needed, the monitoring can go beyond 90 days. She said if there is evidence of retaliation, she reports it to the PREA Site Coordinator for investigation.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Monitoring shall include face-to-face status checks.” A staff that conducts monitoring said she meets with the victim every 30 days.

Document review – There was retaliation monitoring documentation in the twenty-five investigations that required monitoring. All were initiated in a timely manner, however Twelve cases had gaps of two months between meetings with inmate victims. In three cases, two meetings were documented on the same date after a two month gap. In one case, the monitoring was started two months after the inmate reported.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Reporters and witnesses shall be monitored for retaliation at the minimum of one time utilizing the assessment-retaliation status checklist form. If no retaliation is reported, monitoring will cease.” The Warden said anyone that is a witness or cooperates with an investigation thinks they are experiencing retaliation, the same measures to protect the victim would be used for them, removal of the person retaliating.

CORRECTIVE ACTION REQUIRED: Retaliation monitoring was conducted in both sexual abuse and sexual harassment incidents. Half of the monitoring two month gaps between meetings and in some cases, the missed meeting was documented on the same date as the next required meeting. One monitoring was not started until two months after the incident was reported. Gaps in meetings and late starts on monitoring can cause suspected retaliation to be missed. The Warden must remind the staff monitoring of the policy and standard requirements for periodic meetings with inmates and proper documentation of suspected retaliation and protective measures taken. The facility must provide completed retaliation monitoring forms for review.

Corrective Action Completed: The facility provided documentation for review of retaliation monitoring During April, May and June for seven inmates that reported sexual abuse. The items monitored were in accordance with the requirements of substandard (c). The monitoring was conducted with four periodic meetings over 90 days. The documentation shows practice that now meets the provisions of the

	standard.
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Following an allegation of offender sexual abuse or if an offender is assessed as being at high risk of victimization, the shift supervisor shall ensure the offender is housed in the least restrictive housing available to ensure safety. When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.” MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30 day review.</p> <p>Facility Head Interview – The Warden said if an inmate has been determined to be at very high risk of sexual abuse, the facility will review all housing options before considering placement in involuntary segregation. Any placement would be temporary until an alternative housing can be found. She said the facility has not had an involuntary placement in segregation from the risk assessment in the last year.</p> <p>Staff who Supervise Segregated Housing Interview – Staff that supervise segregated housing said all inmates in segregated housing have a restriction of privileges, programs, education and work opportunities. The reason for no alternative housing is documented on the PREA Notification Checklist form. If the inmate is in segregation for 30 days, he does a review to determine if there are alternative housing solutions.</p> <p>Inmate Interviews – the inmates that reported sexual abuse said they were not involuntarily placed in segregation.</p> <p>The facility reported on the PAQ there were no inmates placed in involuntary segregation in the last 12 months.</p> <p>The facility meets this standard based on the information from interviews and policies reviewed.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard

Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment."

Institutional Investigator Interview - The Institutional Investigator said PREA reports are referred for investigation using the PREA Allegation Notification Checklist. The checklist is completed at the time the allegation is reported. If the allegation is sexual harassment it stays with the Institutional Investigator. If it is sexual abuse it is referred to the PREA Unit Investigator. If the type of incident cannot be determined from the initial report, she will gather additional information to determine who will do the investigation. She said investigations are initiated immediately.

PREA Unit Investigator - The PREA Unit Investigator said she is immediately contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.

Investigation File Review - There were 25 completed investigations provided for review that occurred during the review period. Investigations were found to be promptly started, circumstantial and physical evidence was documented thoroughly, conducted objectively.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Investigators shall receive specialized PREA investigation training prior to conducting an investigation involving offender sexual abuse." The PREA Unit Investigators conduct all of the sexual abuse investigations

PREA Unit Investigator - The PREA Unit Investigator said she has completed the NIC Sexual Abuse Investigations in a Confinement Setting, the NIC Advanced Sexual Abuse Investigations training and training by VAWA online.

Document Review - NIC training certificates were provided for 12 investigators in the PREA Unit.

c) Institutional Investigator Interview - The Institutional Investigator said she gathers initial information from incident reports and the PREA Allegation Notification Checklist. She will review the information, review video if available, interview the victim, witnesses and the subject of the allegation. Most sexual harassment incidents do not produce physical evidence. She would not collect physical evidence for a sexual abuse case. She would protect it until the PREA Unit Investigator can collect it.

PREA Unit Investigator Interview - The PREA Unit Investigator said she receives a Request For Investigation from the facility and the PREA Notification Checklist when there is a clear sexual abuse allegation. The PREA Unit Investigators conduct the administrative and criminal investigations for sexual abuse. She reviews the initial information, reviews video evidence if available, conducts a background investigation

of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident. The facility will assist by protecting the scene and the SANE staff collecting evidence through a forensic examination.

Document Review – There were twenty-one investigations of sexual abuse provided for review. PREA Unit Investigators conducted these investigations. The investigations were initiated shortly after the facility received the allegation. The investigation reports documented the presence or absence of video and physical evidence. The background for the victim and the subject were documented to include charges, conduct and prior PREA investigations. Interviews with the victim and the subject of the investigation were thoroughly documented. The report also documented identification and interview of witnesses or if there were none identified.

d) PREA Unit Investigator Interview – The PREA Unit Investigator said they do not conduct compelled interviews. If a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it certified mail to document the referral.

e) PREA Unit Investigator Interview – The PREA Unit Investigator said she is not allowed to subject the victim to a truth telling device. The subject of the investigation could be asked to complete a voice stress analysis. She determines the subject's credibility on a case by case basis from the background review of prior criminal history, PREA investigations and conduct.

Institutional Investigator Interview – The Investigator said

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Administrative investigations shall include an effort to determine whether staff member actions or failure to act contributed to the abuse."

Institutional Investigator Interview – The Investigator that conducts sexual harassment investigations said she reviews staff actions of if they failed to act by looking at chrono records (housing unit logs), post orders and policy violations to ensure staff.

PREA Unit Investigator – The PREA Unit Investigator said she reviews staff actions in relation to the coordinated response plan, policies and procedures.

g) Investigation File Review – 25 investigations were provided for review. All investigations were documented on an investigation report that contained a description of video evidence, physical evidence, and interviews with the victim, witnesses and the perpetrator. All attachments were listed at the end of the report.

h) Investigation File Review – There were four investigations that were substantiated during the review period. Three were incidents of sexual abuse and one was an incident of sexual harassment. None of the four were criminal violations and were not referred for prosecution. The facility reported no substantiated

	<p>allegation of conduct that appear to be criminal on the PAQ.</p> <p>The PREA Unit Investigator – The PREA Unit Investigator said if a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it certified mail to document the referral. She has not referred a case for prosecution at SCC in the last 12 months.</p> <p>i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Inquiries regarding offender sexual abuse and harassment and all supporting documents shall be retained as long as the alleged perpetrator is incarcerated or employed with the department, plus 5 years and in accordance with the department procedure regarding records retention.”</p> <p>j) Investigation Files Review – in cases where the staff resigned prior to being interviewed, the investigator made several attempts to contact the staff. If they were not successful, the investigation continued based on the evidence obtained.</p> <p>Investigator Interview – Both investigators interviewed said if the victim or the subject left the facility, they would do their best to contact staff via telephone with contact information from HR or contact the Parole Officer for the inmate to arrange a phone interview.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.”</p> <p>Investigator Interviews – The Facility Investigator said she uses the evidence standard of preponderance of evidence for administrative investigations she conducts for sexual harassment. She described the standard as more than 50% of the evidence indicates the incident happened as reported. The PREA Unit Investigator said she uses the preponderance of evidence standard for the administrative investigations of sexual abuse.</p> <p>Investigation Report Review – Twenty-Five administrative investigation reports were reviewed. All appeared to be using the preponderance of evidence as the standard in determining outcomes.</p> <p>The facility meets the standard based on information from interviews, documents and</p>

	policies reviewed.
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Upon the completion of an offender sexual abuse investigation, the department's PREA unit shall make written notification to the alleged victim regarding the outcome of the investigation utilizing the applicable PREA alleged sexual abuse by offender notification form or the PREA alleged sexual abuse by staff member notification form."</p> <p>Warden Interview – The Warden said that inmates are notified of the investigation outcome for incidents of sexual abuse. The notification comes from the PREA Unit to the PREA Site Coordinator (PCM). The PCM provides it to the inmate.</p> <p>Investigator Interview – the PREA Unit Investigator said she provides the written notification to the facility PREA Site Coordinator (PCM), The PREA Site Coordinator provides the written notification to the inmate.</p> <p>Inmates that reported Sexual Abuse – Two inmates that reported an incident of sexual abuse at SCCC during the review period were interviewed and the investigation files reviewed. One said he was notified in writing of the investigation outcome. One did not recall being notified of the outcome. A review of the investigation files found a written notification of outcome provided to both inmates.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All subsequent notifications shall be made when: Staff member on offender allegations: following the completion of the investigation, the offender shall be notified when the following occurs (unless the investigation is unfounded); The staff member perpetrator is no longer assigned to the housing unit; The staff member perpetrator is no longer employed by the department; The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution; A disposition of charges exists related to sexual abuse within the institution." There were no inmates interviewed that reported sexual abuse against staff.</p> <p>Investigation File Review – Six investigations involving staff sexual abuse allegations were reviewed. A written notification of outcome involving an allegation of staff sexual abuse were found in all six investigation files.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offender on offender allegations: following the completion of an investigation, the offender shall be notified when the following occurs: (1) The offender has been indicted on a charge related to sexual abuse within the institution. (2) A disposition of</p>

	<p>charges exists related to sexual abuse within the institution.”</p> <p>Investigation File Review – Fifteen investigations involved alleged sexual abuse by an inmate. The inmate victim was provided with a notification of outcome in all fifteen investigations, including unfounded.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA unit shall forward the written notification to the offender via the PREA site coordinator. The PREA site coordinator shall ensure that the written notification is provided to the offender in a confidential manner.”</p> <p>Investigation File Review – There were Twenty-one allegations of sexual abuse during the review period. A written notification of outcome was provided to the victim in all twenty-one investigations.</p>
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115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures.” The policy follows this provision.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Termination from the department shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse.” The policy follows this provision. The facility reported three staff termination during the audit review period.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All terminations for violations or the resignation of a staff member, who would have been terminated if not for their resignation, shall be reported to relevant licensing or accreditation bodies and law enforcement.” The policy follows this provision.</p> <p>Human Resources Staff Interview – The Human Resources staff said the dismissal of staff is handled by the warden through the agency central office HR. discipline is progressive and based on prior history.</p> <p>The PAQ reported 6 staff who have violated the sexual abuse or sexual harassment policy in the last 12 months. A review of the investigations found only 4 substantiated cases of sexual abuse or sexual harassment in the last 12 months. All 4 staff resigned either prior to or during the investigation, therefore there was no documentation of discipline or termination of staff. None off the staff had a license that would require reporting of sexual abuse to the license agency.</p> <p>I find the facility meets the provisions of this standard based on the information from</p>

	interview, documents and policies reviewed.
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies and law enforcement." The policy reflects the provisions of the standard. The facility reported zero contractors reported to law enforcement for an incident of sexual abuse during the review period.</p> <p>Warden Interview – The Warden said a contractor would be prohibited from entering the facility for a substantiated incident of sexual abuse. She could suspend entrance to the facility during the investigation. Incidents of sexual harassment would be reviewed on a case by case basis and could result in removal as well.</p> <p>Investigation File Review – A review of the investigation files found contractors were not the subject of a sexual abuse or sexual harassment investigation during the review period.</p> <p>The facility meets this standard based on information from interviews, document and policies reviewed.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be subject to corrective actions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender on offender sexual abuse in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard. The facility reported on the PAQ there were no administrative or criminal findings that an inmate committed sexual abuse in the past 12 months. A review of the investigation files found no substantiated incidents of inmate sexual abuse during the review period.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Sanctions shall be commensurate with the nature and circumstances of the abuse</p>

	<p>committed, the offender’s disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>Warden Interview – Policy allows for consideration of prior discipline and mental health issues in deciding sanctions for an incident of sexual abuse.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The corrective action process shall consider whether an offender’s mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, shall be imposed in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If found guilty of sexual abuse, the PREA site coordinator or designee shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse.”</p> <p>Mental Health Staff Interview – The mental health staff said he would provide mental health services for inmates found to be an abuser in an incident of sexual abuse at SCCC. He would focus the therapy on triggers for the behavior. The inmate would not be restricted in other programming if he refuses to participate.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact.”</p> <p>f) Missouri DOC policy IS19-1.6 Offender Accountability Program states “a report of sexual misconduct, made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying.” The policy reflects this provision of the standard.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department prohibits all sexual activity between offenders. Consensual sexual activity between offenders shall not be deemed sexual abuse and shall be addressed in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has experienced prior sexual victimization, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening.”</p> <p>Risk Screening Staff Interview – staff that complete the risk assessment said if the inmate reports being a prior victim of sexual abuse either in the community or in an institution, they offer a referral for mental health services to the inmate at the time of the screening. The acceptance or refusal are documented on the screening instrument.</p> <p>Inmates that report prior victimization – inmates that reported being a prior victim at the screening said they were offered to be seen by mental health.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If the screening indicates that an offender has previously perpetrated sexual abuse, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a mental health practitioner within 14 calendar days of the intake screening.”</p> <p>Risk Screening Staff Interview – staff that complete the risk screening said if the inmate reports or is documented in records as being a prior perpetrator of sexual abuse, they offer a referral to mental health services at the time of the screening.</p> <p>d) Risk Screening Staff Interview - Staff that conduct the risk assessment said the information they gather from inmate interviews and the inmate record to complete the risk assessment is confidential and strictly limited to staff involved in the risk assessment process and review. The risk assessment is completed in an electronic system that access must be granted.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting.”</p> <p>Medical Staff Interview – medical staff said they are not allowed to share information reported by an inmate about prior sexual abuse that occurred in the community with facility investigation staff without a signed informed consent from the inmate.</p> <p>The facility meets the provisions of this standard based on information from the interviews, document and policies reviewed.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims of sexual abuse shall receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional judgment."</p> <p>Medical Staff Interview – Medical staff said inmates that are victims of sexual abuse would be assessed and treated for emergent injuries and instructed not to destroy evidence until a forensic examination can be conducted. The forensic exam can be conducted by the SANE staff at SCCC or if a hospital with a SANE.</p> <p>Inmates that Reported Sexual Abuse – Inmates that reported sexual abuse at SCCC said they were seen by medical or mental health staff immediately after reporting the incident to staff. A forensic examination was offered to them.</p> <p>b) Staff Interviews – All staff said they would protect the victim until the shift commander arranged for staff to take the victim to medical or they were instructed to take the victim to medical. The Shift Commander would notify medical. If medical staff were temporarily unavailable, custody staff would wait with the victim until they could be seen by medical.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate."</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."</p> <p>The facility meets the provisions of the standard based on information from interviews and policies reviewed.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each victim and abuser shall be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals shall be completed for continued care following their transfer to, or placement in, other facilities or their release from custody."</p> <p>Medical Staff Interview – medical staff said inmate victims of sexual abuse would be provided follow up treatment on injuries and medication management for STI care.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims and abusers shall be provided with medical and mental health services consistent with the community level of care."</p> <p>Medical and Mental Health Staff Interview – both medical and mental health staff said the services provided would be the same as the services offered in the community.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate."</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."</p> <p>Inmates that Reported Sexual Abuse Interview– The inmates that reported sexual abuse did not report being charged for medical services.</p> <p>h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."</p> <p>Mental Health Staff Interview – the mental health staff said if the inmate wanted services, he would try to identify triggers that cause the abusive behavior.</p> <p>The facility meets the provisions of this standard based on information from interviews and policies reviewed.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard

Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded." The policy reflects this provision of the standard.

Investigation File Review – Twenty-five investigations were concluded during the review period. Twenty-one were for allegations of sexual abuse with two with an unfounded outcome. Nineteen required an incident review. The facility reported Twenty-eight sexual abuse investigations. This number included ongoing investigations.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Incident debriefings shall be held within 30 days of the conclusion of a formal investigation." The policy reflects this provision of the standard.

Document Review – Nineteen Incident Debriefing forms were reviewed. Ten of the nineteen were completed outside of 30 days from the completion date of the investigation based on the date of the review on the form or the date the review team signed the form. The PREA Coordinated verified that the date of completion of the investigation report is the date the investigation is officially completed.

CORRECTIVE ACTION REQUIRED: More than half of the debriefings reviewed were completed beyond 30 days after the date of the investigation report completion. Incident Debriefings will be reviewed as they are completed in March, April and May.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The review team for offender sexual abuse events shall include the PREA site coordinator, and other upper level administrators, when applicable, with input from the shift supervisor, investigators, and medical or mental health practitioners." The policy reflects this provision of the standard.

Warden Interview – The Warden said the incident debriefing team consisted of the Assistant Wardens, Investigator, medical staff, mental health staff, victim advocate staff.

Document Review – Nineteen completed Incident Debriefing forms were reviewed. The staff that were on the review team are listed on the form with title and each sign the form as well.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The PREA sexual abuse incident debriefing report shall be completed by the PREA site coordinator outlining in detail the findings of the incident debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse incident debriefing form." The form requires the review team to answer questions for the five factors in this standard.

	<p>Warden Interview – The Wardens said the debriefing team looks at the response of staff to the report; factors that may have contributed to the incident, such as sexual orientation or gender identity of the victim, the victim’s charges, gang affiliation of an inmate subject, or race; barriers or blind spots where the incident occurred; staffing levels; and video camera deployment.</p> <p>PREA Compliance Manager and Incident Review – An Assistant Warden is designated as the PCM for SCCC. He said he schedules the reviews. The team can consist of the other AQ, Major, medical staff, mental health staff, Investigator, SANE staff if one occurred. He documents the review on the form and provides a copy to the Warden and PREA Coordinator. All evidence is reviewed including watching the video if available. If corrective actions are identified, they are documented on the form and coordinated with the Warden for completion or documented why it cannot be completed.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The facility shall implement the recommendations for improvement, or shall document its reasons why recommendations shall not be implemented.” The policy reflects this provision of the standard.</p> <p>CORRECTIVE ACTION REQUIRED: More than half of the debriefings reviewed were completed beyond 30 days after the date of the investigation report completion, which does not meet the standard. Incident Debriefings will be reviewed as they are completed in March, April and May.</p> <p>Corrective Action Completed: Five PREA Sexual Abuse Debriefings were completed after the interim report was issued and provided for review. The incident reviews provided the names of the review team, information about the investigation, a review of the factors in substandard (d) and were signed by the review team. The reviews were completed at or under 30 days from the investigation conclusion. The practice now meets the provisions of this standard.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Annual Site Report: Each facility shall utilize information from the offender sexual abuse incident debriefings to prepare an annual report to be submitted to the department’s PREA manager by the last working day in March.” The policy provides the definitions for sexual abuse and sexual harassment in section II. The definitions are equal to the definitions in the PREA standards.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each</p>

	<p>facility's current year's data and corrective actions."</p> <p>c) Missouri DOC Annual Report - The 2022 and 2021 MODOC PREA Annual Reports were reviewed. The reports provided a table of data broken down by incident type and outcomes. This data can be used to complete the Survey of Sexual Victimization summary report.</p> <p>d) PREA Coordinator Interview - The PREA Coordinator said all information and data from incidents of sexual abuse and sexual harassment are retained in the Investigative Reporting Intelligence System.</p> <p>f) PREA Coordinator Interview - The PREA Coordinator said he uses the data and incident information for substantiated investigations from the Investigative Reporting Intelligence System to complete the Survey of Sexual Victimization when it is requested.</p> <p>2022 SSV Summary Report</p> <p>2021 SSV Summary Report</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.88 Data review for corrective action	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Agency Report: The PREA manager shall prepare an annual report compiling each facility's current year's data and corrective actions. a. The report shall include: (1) a comparison with prior year's data, (2) corrective actions, and (3) an assessment of the department's progress in addressing offender sexual abuse."</p> <p>2021 & 2022 PREA Annual Report - The PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>Agency Head - The Division Director said incident data is used to assess and improve housing assignments, video monitoring and staffing levels. Additional training is provided to staff through PREA Unit staff speaking at basic training courses.</p> <p>PREA Coordinator - The PREA Coordinator said the annual report compares data since 2013 and summarizes ongoing corrective actions.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department's annual PREA report shall be made available to the public on the</p>

	<p>department's internet website. The report shall be forwarded to the department director for approval.”</p> <p>Agency Head – The Division Director said the Director approves the report prior to posting it on the department’s website.</p> <p>Document Review – The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. Though the Agency Head Designee said the reports are reviewed and approved by the Director, the reports are not signed by the Director either electronically or by signature. It is recommended that the annual report be signed by the Director or designee each year.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The CAO or designee, PREA manager or department director shall edit specific material from the reports when publication would present clear and specific threat to the safety and security of a facility. The CAO or designee, PREA manager, or department director shall indicate the nature of the material edited.”</p> <p>PREA Coordinator – The PREA Coordinator said personally identifying or confidential information about incidents are not included in annual reports.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>
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115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>PREA Coordinator – The PREA Coordinator said the PREA incident information is securely stored in the Investigative Reporting Intelligence System (IRIS). Access to IRIS is limited to investigators, PREA Site Coordinators, Warden’s and other staff directly involved in incident investigation and review.</p> <p>Missouri DOC Annual PREA Report - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The last two years of PREA Annual Reports were reviewed and found to have a comparison of sexual abuse data from 2013 to 2022. The reports did not contain any personal identifiers.</p> <p>The facility and agency meet this standard based on the information from the PREA Coordinator interview and review of annual reports found on the MODOC PREA webpage.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. South Central Correctional Center was audited three years ago. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all of their facilities during all audit cycles.</p> <p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with inmates in a private room with a window for observation by staff.</p> <p>A notice of audit was posted throughout the facility six weeks prior to the audit notifying inmates they could send confidential correspondence to this auditor. Five letters were received prior to the onsite audit from three inmates. Two of the inmates refused to be interviewed. One agreed to be interviewed.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Final PREA reports were observed on the Missouri DOC PREA webpage at https://doc.mo.gov/programs/PREA.</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	no
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b) Policies to ensure referrals of allegations for investigations		
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c) Policies to ensure referrals of allegations for investigations		
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a) Employee training		
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	no
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a) Use of screening information		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b) Use of screening information		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c) Use of screening information		
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	no
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	no
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	no
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)			
	<table><tr><td data-bbox="316 174 1289 568"><p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p></td><td data-bbox="1289 174 1490 568">yes</td></tr></table>	<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>	yes
<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>	yes		

PREA Facility Audit Report: Final

Name of Facility: Western Reception, Diagnostic and Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 07/16/2024

Date Final Report Submitted: 10/11/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 10/11/2024

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	04/29/2024
End Date of On-Site Audit:	05/01/2024

FACILITY INFORMATION	
Facility name:	Western Reception, Diagnostic and Correctional Center
Facility physical address:	3401 Faraon Street, St Joseph, Missouri - 64506
Facility mailing address:	,

Primary Contact

Name:	Neil Wofford
Email Address:	neil.wofford@doc.mo.gov
Telephone Number:	8163872158

Warden/Jail Administrator/Sheriff/Director	
Name:	Warden Kimberly Herring
Email Address:	kimberly.Herring@doc.mo.gov
Telephone Number:	816-387-2158

Facility PREA Compliance Manager	
Name:	Neil Wofford
Email Address:	Neil.Wofford@doc.mo.gov
Telephone Number:	O: 816-387-2158

Facility Health Service Administrator On-site	
Name:	Jennifer Hernandez
Email Address:	Jennifer.Herandez@doc.mo.gov
Telephone Number:	816-387-2158

Facility Characteristics	
Designed facility capacity:	1968
Current population of facility:	1524
Average daily population for the past 12 months:	1587
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males

Age range of population:	18-83
Facility security levels/inmate custody levels:	Minimum, Medium, Maximum
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	485
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	59
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	69

AGENCY INFORMATION

Name of agency:	Missouri Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2729 Plaza Drive, Jefferson City, Missouri - 65109
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102
Telephone number:	5737512389

Agency Chief Executive Officer Information:

Name:	Trevor Foley
Email Address:	Trevor.Foley@doc.mo.gov
Telephone Number:	573-526-6607

Agency-Wide PREA Coordinator Information

Name:	Darren Snellen	Email Address:	darren.snellen@doc.mo.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-04-29
2. End date of the onsite portion of the audit:	2024-05-01

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	This auditor called the YWCA in St Joseph to verify they were working with the facility on an MOU for services and training.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1968
15. Average daily population for the past 12 months:	1587
16. Number of inmate/resident/detainee housing units:	4
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit**Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit**

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1549
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	5
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	370
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	100
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	10
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	10

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	2
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	103
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	103
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	485
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	69

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	59
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	20
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<div> <input type="checkbox"/> Age </div> <div> <input type="checkbox"/> Race </div> <div> <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The total population number was divided by 20. That result was used to select inmates for random interviews using a list sorted by housing unit. This ensured inmates from each housing unit were selected at random using a numerical interval.

56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	20
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	3
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The PCM contacted the Case Manager that conducts the risk assessments to inquire about inmates with cognitive disabilities. None were at the facility at the time of the onsite audit.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The PCM contacted the Case Manager that conducts the risk assessments to inquire about inmates that are blind or have significant visual impairment. None were at the facility at the time of the onsite audit.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>7</p>

64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	1
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	4
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The staff that supervise segregation reported no inmates being involuntarily placed in segregation for a high risk of victimization. During the onsite audit, none of the inmates interviewed in segregation reported being involuntarily placed in segregation for reporting a PREA.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None

If "Other," describe:	Staff were selected for random staff interviews from the shift rosters. Selections were based on post location, gender of staff, staff from every shift, and non-supervisory staff.
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	20
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No

79. Were you able to interview the PREA Compliance Manager?

☒ Yes

☐ No

☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☒ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☒ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☒ First responders, both security and non-security staff
- ☒ Intake staff

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Staff Qualified Victim Advocate
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.
SITE REVIEW AND DOCUMENTATION SAMPLING	
Site Review	
<p> PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information. </p>	
84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="checked" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="checked" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	PREA education documents were requested for all inmates interviewed. Risk assessments were requested for the targeted inmates interviewed. Additional risk assessments were requested to verify practice using the new assessment process during the corrective action period. Staff documents were reviewed for the random staff interviewed and a random selection from a list of staff hired during the 12 months prior to the audit. Medical and foodservice contract staff were selected from the contract staff list for document review. Volunteers were randomly selected from the volunteer list for review of PREA training.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	13	0	13	0
Staff-on-inmate sexual abuse	21	0	21	0
Total	34	0	34	0

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	7	0	7	0
Staff-on-inmate sexual harassment	5	0	50	0
Total	12	0	12	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	2	5	6	0
Staff-on-inmate sexual abuse	2	5	8	6
Total	4	10	14	6

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

13

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	4
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	9
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	7
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	7
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

0

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☐ No

☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☐ Yes

☐ No

☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☐ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment is the policy that provides the zero-tolerance policy, definitions of sexual abuse and sexual harassment, and the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>b) Based on the organization charts provided, the Missouri Department of Corrections has a PREA Coordinator in the Office of Professional Standards that reports to the Director of that division. The Director of OPS then reports to the MODOC Director.</p> <p>PREA Coordinator Interview – The PREA Coordinator said he has sufficient time and authority to fulfill the duties of the PREA Coordinator for the agency. He oversees the PREA Unit that consists of dedicated investigators and support staff that assist him in managing and monitoring PREA standards compliance and PREA investigation at all facilities in the agency. Each facility has a PREA Compliance Manager that reports to him for PREA Compliance matters.</p>

	<p>c) Document Review - The organizational chart was provided for WRDCC. The PREA Site Coordinator (PREA Compliance Manager) is a Deputy Warden that reports directly to the Warden.</p> <p>PCM Interview - The Deputy Warden said she has the time and authority to complete the requirements of being the PREA Compliance Manager for WRDCC. He is responsible for monitoring PREA compliance in addition to his other duties as the Deputy Warden of Offender Management. He has assistance from other staff as well.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>It was reported on the PAQ that the Missouri Department of Corrections currently does not contract for the confinement of inmates with a private or other governmental agency. The PREA Coordinator stated in his interview the Missouri DOC is not contracting with anyone for confinement of inmates at this time. A memorandum was provided by the PCM that states the Ozark Correctional Center does not contract for the confinement of inmates.</p>

115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires each facility to “maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse.” “The staffing plan shall consider the facility’s physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.”</p> <p>Document Review - a 2023 Staffing Plan Review document was provided for review. The review of the staffing plan was developed based on generally accepted detention practice, internal and external reviews, a review of blind spots, composition of the inmate population, the number of supervisory staff, the programs on each shift, and the prevalence of substantiated and unsubstantiated incidents of sexual abuse. There were no judicial findings, federal investigations, state or local regulations that</p>

required adjustments to the staffing plan. The plan was presented in several documents: 2009 post analysis, staffing dashboard, COI Roster for 2024, custody vacancy rate, and the WRDCC organizational chart.

Tour Observations - Tour Observations – All areas of the facility were toured including housing units, recreation, medical, foodservice, education, maintenance, intake clothing issue, paint shop, laundry, and visiting room. Staff were observed in all areas of the facility. Security staff were seen making rounds in housing units and program areas during the tour. Staffing levels provided appropriate monitoring of inmates in housing units and all program/service areas. Privacy screens in bathrooms did not create blind spots. Cameras were observed throughout the facility. Areas where cameras were not present were locked and only accessible to staff. Cameras were observed covering blind spots in recreation rooms, the warehouse, kitchen, classrooms, library, and maintenance shops. Mental health and medical offices where inmates would meet with staff had windows to allow for staff walking by to observe staff and inmate interaction. Classrooms all had windows to allow for security staff to observe the classrooms during rounds in the hallway.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall comply with the staffing plan on a regular basis, deviations from the staffing plan shall be documented and justification for deviations noted.”

Warden Interview – The Warden said she has weekly meetings to monitor the staffing levels and hiring to fill vacancies. She said mandatory posts are covered with overtime when there is a staff absence. The video monitoring system was upgraded in 2023 improving their ability to store video longer and added cameras. When they complete an annual staffing plan review, it is documented and sent to central administration. They usually review the staffing plan for changes in December for the next year.

PCM Interview - The PREA Site Coordinator/Deputy Warden said he meets with the Warden and HR for the annual staffing plan review. Staffing is also reviewed throughout the year on a weekly basis. Vacancies are monitored to ensure they are being filled. Deviations from the staffing plan have not occurred in the last year.

Deviations from the staffing plan would be closing mandatory security posts and implementing emergency procedures. Overtime is always utilized to cover a mandatory post due to absences from call offs. Non-custody staff are also helping cover custody posts that are qualified through training.

c) Document Review – The staffing plan review minutes included an evaluation of the video monitoring system and whether additional resources were needed for staffing plan compliance. A memorandum from the PREA Site Coordinator stated a review of the video monitoring system was conducted by him, the Major and Assistant Wardens, maintenance, and an electronic technician. The review indicated staffing shortages are being covered by bid overtime, mandatory overtime, non-custody volunteers, corrections staff from other MODOC facilities and a 19 hour custody shift. Video monitoring had an upgrade to the server and 10 additional cameras in 2023.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states

	<p>"Each institution shall ensure the classifications of lieutenant or above conduct and document unscheduled and unannounced rounds to identify and deter offender sexual abuse and sexual harassment. Each facility shall ensure that rounds occur periodically in all areas of the facility. Staff members shall be prohibited from alerting other staff members that these rounds are occurring. The rounds shall be documented and readily accessible during audits as outlined in the facility's standard operating procedure." The policy reflects the requirements for this provision of the standard.</p> <p>Document Review – Shift summary reports and housing unit chronological logs were requested for random dates to review for documentation of unannounced rounds. PREA or security rounds were documented on each shift during the dates. Unannounced rounds were conducted by lieutenants and captains on each shift.</p> <p>Intermediate Staff Interview – A Shift Supervisor said he conducts an unannounced round daily in a portion of the facility and covers the whole facility in a week. He said the rounds are documented in housing unit chronological logs and the shift summary.</p> <p>Random Staff Interviews – All staff interviewed said they see shift supervisors and assistant shift supervisors making rounds several times per week.</p> <p>Inmate Interviews – Inmates were asked if they see supervisors making rounds. Most said they see sergeants daily. Most inmates said they see captains and lieutenants in the housing unit several times per week.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.</p>
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115.14	Youthful inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "A youthful offender will not be placed in a housing unit in which he will have sight, sound, or physical contact with any adult offender through use of a shared day room or other common space, shower area, or sleeping quarters in accordance with the institutional services procedure regarding offender housing assignments."</p> <p>PCM Interview – The PREA Site Coordinator/DW said WRDCC does not house youthful inmates. If the diagnostic/intake unit receives an inmate under 18, WRDCC will immediately transfer the inmate to Farmington Correctional Center.</p> <p>It was reported on the PAQ that WRDCC does not house youthful inmates. None of the inmates interviewed were under 18 years of age.</p>

115.15	Limits to cross-gender viewing and searches
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1461 589">a) Missouri Department of Corrections policy IS20-1.3 Searches prohibits cross gender strip searches except in exigent circumstances. Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment also prohibits cross-gender strip searches except in exigent circumstances. The facility reported on the PAQ that no cross gender strip searches occurred in in the past 12 months. The policies reflect the requirements of the provision of this standard.</p> <p data-bbox="256 622 1430 701">Inmate Interviews – no male inmates interviewed reported being strip searched by female staff.</p> <p data-bbox="256 734 1461 902">c) Missouri DOC policy IS20-1.3 Searches requires staff to document all cross gender strip searches on the cross gender search form. There were no cross gender strip search forms presented for review. The policy reflects the requirements for this provision of the standard.</p> <p data-bbox="256 936 1477 1473">d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders shall be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with, institutional services, and probation and parole procedures regarding searches.” The policy also requires staff of the opposite gender to announce their presence prior to entering a housing unit. These announcements are to be logged in the housing unit chronological log. Post orders for each housing unit were provided for review. The post orders required a mandated PREA announcement to be made and documented in the housing unit log when opposite gender staff begins work in a housing unit or enters when there are no opposite gender staff in the unit. The policy and post orders reflects the requirements for this provision of the standard.</p> <p data-bbox="256 1507 1477 2089">Tour Observations – There were no cross gender viewing issues with the bathrooms. The entrance to the larger bathrooms in HU6 were covered by a large wooden partition that prevented female staff from seeing into the toilet stalls by the entrance. The showers were in the back with partitions that did not create a blind spot but provided a sufficient modesty screen. Housing unit one and eleven had showers and toilets in separate rooms on each wing with shower curtains hanging at the doorway in place of solid doors. Toilets had partitions between them and showers were in individual stalls or gang shower areas with a block wall that prevented cross gender viewing. The segregation unit showers were barred with expanded metal and a solid metal panel in the middle providing a modesty screen. The infirmary rooms had toilets with partitions to provide an appropriate amount of privacy. The showers were either in the room with a curtain or in the center of the infirmary with curtains. Opposite gender staff announcements were observed during the tour. Opposite gender staff announcements were documented in housing unit logs as “PREA</p>

Announcements.” Signs indicating female staff are on the unit are hung up for hearing impaired inmates.

Random Staff Interviews – Twelve staff were selected at random from shift rosters for interviews. All staff said they felt like the inmates could shower and use toilet facilities with enough privacy that staff could not see their genitals or buttocks. All staff were aware of and hear opposite gender staff make announcements when entering housing units or bathrooms.

Document Review – Housing unit logs and shift summaries were requested for random dates in December 2023, January, February, March, and April 2024. PREA announcements were found when female staff entered housing units or took over a shift in a housing unit.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not perform strip or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, diagnostic center reception and orientation, and receiving screening intake center.” Missouri DOC policy IS20-1.3 Searches prohibits staff from performing a strip search for the sole purpose of determining an inmate’s gender. The policies reflect the requirements of the provision of this standard.

Random Staff Interviews – All staff said that strip searching a transgender inmate solely for determining their genital status is prohibited by policy, not allowed and would be unprofessional.

Inmate Interview – Two inmates that identify as transgender said they had not been strip searched only to determine their genital status since being at the facility.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Custody staff members shall be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs.” The policy reflects the requirements for this provision of the standard.

Random Staff Interviews – The staff randomly selected for interview said they had been trained how to do cross gender searches and searches of transgender inmates. Female staff said they have done cross gender pat searches of inmates at WRDCC. The search described for transgender inmates was similar to the search of a female inmate.

Inmate Interviews – Some inmates said they have been pat searched by female staff. They felt the search was appropriate and professional. None said they had been subjected to a cross-gender strip search. Two transgender inmates said pat searches by male staff were not intrusive and appropriate.

The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 309 544 342">Auditor Discussion</p> <p data-bbox="256 387 1469 880">a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires staff to “provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” LEP inmates will be provided the PREA video transcript and PREA brochure in their native language. If these cannot be translated into their native language, the PREA site coordinator will utilize an interpreter to assist the inmate in understanding the material. “Offender interpreters shall not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.”</p> <p data-bbox="256 920 1477 1283">Intake Staff Interview – Intake staff said the facility has some staff designated as interpreters. He said the facility had an interpretive service by telephone that could be used when staff cannot interpret. The PREA brochure is in Spanish or can be provided in several other languages. If an inmate cannot read, the PREA brochure is read by staff. A video is shown that provides the information through audio for visually impaired inmates and with closed captions for hearing impaired inmates. If an inmate cannot read, He reads the brochure to them. If an inmate cannot hear, he can communicate with them in writing. Inmates with cognitive disabilities will receive the PREA education individually from staff to ensure they understand the material.</p> <p data-bbox="256 1323 1477 1525">Random Staff Interviews – The staff interviewed either knew or thought there was an interpretive service the facility could use for LEP inmates. They said the shift supervisor would be notified when it was needed and could access it. They also knew there were some staff that could translate a few languages. None of the staff said it would be appropriate to use an inmate to translate for an LEP inmate.</p> <p data-bbox="256 1565 1477 1888">Inmate Interviews – Seven inmates interviewed had hearing impairments. One of the seven was deaf. A staff member provided sign language interpretation assistance during the interview. This inmate said he was asked the questions for the assessment in writing. The other six inmates with hearing impairments said they could hear me during the interview and didn’t need accommodation. Two inmates were limited English proficient and required an interpreter for the interview. Two staff were fluent in Spanish and provided interpretive services. The inmates said staff provided interpretive services at the assessment interview and during the intake education.</p> <p data-bbox="256 1906 1477 2018">Five inmates had physical disabilities and were in a wheelchair. None of these inmates needed assistance during the intake process or to make a report. There were no inmates with cognitive or visual impairment available for interview.</p> <p data-bbox="256 2058 1369 2092">The facility meets this standard based on the information from interviews, and</p>

	policies reviewed.
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall not hire or promote any person, staff member, or enlist the services of any contractor that may have contact with an offender when it is known that he: a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or c. has been civilly or administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse."</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background screening, candidate selection, maintenance of employee records, employee discipline, and labor organizations."</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Before hiring new staff members a worksite personnel staff member or designee shall: a. perform a criminal background records check; and b. attempt to contact all prior institutional employers, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background screening."</p> <p>Human Resource Staff Interview - HR staff said criminal background checks and pre-employment background checks are completed for all new hires and promotions. She reviews prior discipline issues that would include sexual harassment. Issues with sexual harassment history would be considered in hiring and promotion decisions. If applicants have prior corrections experience, a supervisor calls the prior employer for a pre-employment PREA check to inquire about substantiated sexual abuse investigations or resignations during a sexual abuse investigation. This is all documented on the form by the supervisor.</p> <p>Document Review - Records were reviewed for seven staff hired in the last year. All seven had a criminal background check completed. Three were not completed prior to their hire date. After inquiring, it was determined these were not the criminal background checks used for hiring. These were provided at the interim report and</p>

cleared. All applicants were asked on the MODOC application if they have ever worked or volunteered for a prison, jail, lockup, community treatment center, mental health facility, alcohol or drug rehabilitation center, juvenile facility or other correctional facility. If they answer yes, a Pre-Employment PREA Check form is completed by staff that call the prior employer to ask if the applicant has ever had a substantiated sexual abuse or sexual harassment investigation or resigned during an investigation. There were two newly hired staff that had worked at a corrections institution prior to working at WRDCC. Documentation of the Pre-Employment PREA Check was provided that supported compliance with the standard.

d) Missouri DOC policy D2-2.2 Background Investigations states "Contract staff members, volunteers, and student interns shall have a background investigation conducted that consists of the criminal history check and any violations that have been reported to pertinent professional licensing and/or certification organizations if applicable."

Human Resource Staff Interview – HR staff said criminal background checks are conducted for all contract staff prior to working at the facility. The criminal background checks are conducted by the Deputy Warden's office. The completed criminal background checks are retained in the HR office.

Document Review – Criminal background checks were requested for five medical contract staff and three foodservice contract staff that started working at WRDCC in the last year. Documentation of completed criminal background checks was provided for seven contract staff that were completed prior to their start date.

e) Missouri DOC policy D2-11.14 Annual Employment Requirements Section III. A requires an annual criminal background check to be completed on the birth month of every employee.

Human Resource Staff Interview – HR staff said she requests a criminal background check be completed on staff annually during their birth month. A criminal background check for contract staff is also completed annually during the birth month.

Document Review – Criminal background checks for five current staff were requested. All five were completed in the last year. Criminal background checks for three veteran medical staff were requested for review and were completed in the last year.

f) Human Resource Staff Interview – HR staff said new hire staff and staff applying for promotions are asked questions about (a) 1-3 of this standard on applications for employment. Staff are not required to complete a self-evaluation annually and are not asked these questions again.

Document Review – The questions required by this standard are asked on all applications for the Missouri DOC. The applications for seven staff hired in the last 12 months were reviewed. All seven had questions on the application that asked about prior convictions or civil judgements for sex offenses and prior sexual abuse in an

	<p>institution.</p> <p>g) Missouri DOC policy D2-2.2 Background Investigations states “False information regarding substantiated allegations of offender or resident abuse and/or harassment on the employment application shall be grounds for termination.”</p> <p>h) Human Resource Staff Interview – HR staff said if another correctional institution contacts the Missouri DOC to inquire about substantiated allegations of sexual abuse or resignations during investigations of a former employee, they will provide information on the substantiated sexual abuse or resignations.</p> <p>The facility meets the provisions of this standard based on the information from interview, policies and documents reviewed.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) The facility reported on the PAQ no substantial expansion or modification since the last PREA audit.</p> <p>Agency Head Interview – The Director said the agency designs expansion and modifications to maximize the agency’s ability to protect inmates.</p> <p>Warden Interview – The Warden said there have been no expansion or modifications since the last PREA audit. If there are any, improving inmate monitoring based on the requirements of the PREA standards would be considered in the design.</p> <p>b) Warden Interview – The Warden said the facility had a new camera storage system installed in 2023 that improved their storage capacity and begin switching to HD cameras. The PREA Site Coordinator was involved in the planning of the upgrade to ensure blind spots were identified and improved.</p> <p>PCM Interview – The PREA Site Coordinator said he was involved in the planning for the upgrade to the video monitoring system. The system was upgraded to increase the time frame for review.</p> <p>The facility meets the standard based on the information from interviews.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment." The policy also instructs staff to take steps to protect evidence. This may include instructing the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom. If possible, staff should not allow the inmate perpetrator to destroy evidence by preventing showering, changing clothes, eating, drinking, or using the bathroom.

Random Staff Interviews - All staff interviewed were asked what their responsibilities are in protecting evidence. All staff said they would ask the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom until evidence can be collected by a SANE at a forensic exam or they are relieved. Staff would ensure the alleged inmate perpetrator would not destroy evidence in the same way. All said they would protect evidence at the scene until it could be collected by investigators.

b) MODOC policy D1-8.13 provides a time frame of 72 hours for possible collection of forensic evidence the same as found in the National Protocol for Sexual Assault Medical Forensic Examinations.

c) MODOC policy D1-8.13 requires the facility health services staff to contact the on-call SANE staff member if the alleged incident occurred within 72 hours. The policy states "The SANE staff member shall collect evidence according to established forensic procedures for processing and document the exam and finding in the applicable department computer system." "If the alleged perpetrator is a staff member, the victim shall be transported to the community emergency room for a sexual assault examination to be performed by a SANE or SAFE." If the alleged perpetrator is an inmate, the shift supervisor shall contact the on call SANE staff and hold the victim in medical until the SANE staff arrive. The facility reported no forensic exams conducted in the past 12 months on the PAQ, however one investigation file had documented a SANE was provided by a SANE staff at WRDCC for an inmate victim of inmate sexual abuse during the review period.

SANE Supervisor - The Centurian Nursing Director/SANE said she covers the eastern region and is on call to conduct forensic exams when needed. She completed the training online through the Missouri Coalition Against Domestic Violence. She said there are eleven trained SANE nurses for the MODOC with five in the eastern region, two in the central region and four in the western region. If she or other SANE staff are not available, the inmate would be transported to a nearby hospital ER with forensic exam services. She said a SANE is always on-call and would have to be already involved in another exam to not be available. She said the forensic exam can be conducted from 72 hours up to 96 hours depending on the type of sexual abuse that occurred and if the person washed, showered, changed clothes, went to the bathroom, or had anything to eat or drink.

A memorandum from the MDOC PREA Coordinator said if staff were involved in the sexual abuse, the inmate victim would be transported to the local hospital for the forensic examination rather than being completed by a MODOC SANE.

	<p>d-e) A letter of agreement between WRDCC and the YWCA St Joseph was provided for review. The agreement was signed in February 2024 and outlines the victim advocate services to be provided by the YWCA Survivor Support Services to inmates at WRDCC. The services include emotional support services to victims of sexual abuse and an advocate to support an inmate during a medical examination.</p> <p>Staff Victim Advocate Interview - A victim advocate qualified staff said he completed an online training. He is notified by the shift supervisor if there is an incident of sexual abuse reported and will report to the facility during off hours. He said the training covered victim care and covered the process of the forensic examination.</p> <p>Conversations with the victim are confidential unless there is information provided that is a safety or security concern. He said he can provide victim advocate services for a forensic exam at the facility or at the hospital. He also provides victim advocate services for the victim during investigator interviews if requested.</p> <p>Document Review – the training completion documents were provided for four WRDCC staff that had completed the victim advocate training. Three through the Missouri Coalition Against Domestic and Sexual Violence and one through the YWCA.</p> <p>Victim Advocate Interview – A victim advocate from the YWCA was called to conduct to verify the MOU with WRDCC. The YWCA staff said there would be training provided to staff and residents can call a hotline for services. If a VA needs to see a resident, they will arrange a special visit through the PREA Site Coordinator. She said the YWCA will provide victim advocate services to residents at a forensic examination or at the investigator interview at WRDCC.</p> <p>PCM Interview – The DW/PREA Site Coordinator said the Chaplain and three custody staff have completed online training that qualifies them as victim advocates. All can provide victim advocate services for an inmate victim at the investigation interview and at a forensic examination. He said services can also be provided by YWCA Victim Advocates.</p> <p>h) The facility has staff that have attended victim advocate training provided by the Missouri Coalition Against Domestic Violence to qualify them to provide victim advocate services for inmates at ACC. The training certificates were provided for the Chaplain and three other staff.</p> <p>The facility meets the provisions of this standard based on the information from interview, policies and documents reviewed.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states

	<p>"The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment."</p> <p>Agency Head - The Director of the Office of Professional Standards was the Agency Head designee and is responsible for the PREA Unit in the office of Professional Standards. He said investigations are completed for all allegations of sexual abuse and sexual harassment in all facilities. The PREA Unit conducts investigations of sexual abuse allegations and the Institutional Investigators conduct investigations of sexual harassment.</p> <p>The facility reported on the PAQ forty-five allegations of sexual abuse and sexual harassment during the last 12 months, forty-five resulting in administrative investigations and two resulting in criminal investigations. Twenty investigation files were selected for review. All twenty were administrative investigations. Seven allegations of harassment were referred to the facility Investigator. Thirteen allegations of sexual abuse were referred to the PREA Unit Investigators.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment." This policy was found posted on the Prison Rape Elimination Act page of the Missouri DOC website at https://doc.mo.gov/programs/PREA. Policy D1-8.4 Institutional Investigations covers requirements for investigations in general. The policy is identified as confidential; therefore it cannot be posted on the MODOC website.</p> <p>PREA Unit Investigator Interview - The PREA Unit Investigator said she is contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Facility Investigator Interview - The Facility Investigator said he investigates only sexual harassment allegations. If a PREA report is clearly an incident of sexual abuse, a Request for Investigation is completed and sent to the PREA Unit. If the allegation is sexual harassment it is referred to him, the Institutional Investigator. If it is not clear what type of incident is being reported, the Facility Investigator gathers more information to determine if it is sexual abuse or sexual harassment. Once it is determined to be sexual abuse, it is referred to the PREA Unit Investigator by completing an RFI and sending it to the PREA Unit in the Office of Professional Standards.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall receive initial PREA training during the department's basic training."

PREA Basic Training Curriculum – The PREA Basic training curriculum was provided for review. It covers the zero-tolerance policy of MODOC; staff responsibilities in prevention, detection, reporting and response procedures; inmate's rights to be free of sexual abuse, sexual harassment and retaliation; staff rights to be free from retaliation; dynamics of sexual abuse; reactions of victims; how to detect signs of sexual abuse; avoiding inappropriate relationships with inmates; and mandatory reporting laws. The curriculum did not cover professional communication with LGBTI inmates. However, The Professional Boundaries lesson plan was provided for review that provides staff information on how to communicate effectively and professionally with LGBTI inmates. This training is all provided at the Basic Academy in a pre-service training for new hires.

Staff Interviews - Staff hired in the last year said they completed the PREA Basic Training at the MODOC Academy. Staff could demonstrate knowledge of zero-tolerance policy, rights of inmates and staff, how to detect signs and response of sexual abuse, the dynamics of sexual abuse, avoiding inappropriate relationships with inmates, and their actions in response to a sexual abuse report.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the time of assignment."

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. Years in which an employee is not required to complete training, the facility site coordinator shall provide refresher information on current sexual abuse and sexual harassment policies."

PREA Refresher #1-12 – After the PREA Basic is completed at academy, staff are required to complete a PREA Refresher training modules every two years. These modules were reviewed and it was found that they did cover the required topics (a) 1-10 in the refresher training.

Staff Interviews – Veteran staff said they complete a PREA Refresher training every 2 years and receive emails monthly between trainings that provide information about responding to reports, detection of sexual abuse, and other information from the PREA Refresher training curriculum as well as policy updates for PREA. Staff demonstrated knowledge of all required topics.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All completed PREA training requires a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed

	<p>the training. This form must be routed through the facility training officer or regional training coordinator.”</p> <p>Document Review – Twelve staff records were reviewed for PREA training completion. Seven were hired in the last year and five were veteran staff. All PREA training was completed within the last two years for veteran staff or shortly after the hire date prior to working with inmates for new staff.</p> <p>The facility meets the standard based on the information from interviews, documents and policies reviewed.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All part-time employees, volunteers, and contract staff members shall receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training.”</p> <p>Training Curriculum – The PREA training curriculum for volunteers and contractors was provided for review. The curriculum provides volunteer and contract staff with the MODOC zero-tolerance policy, rights of inmates, signs of sexual abuse, MODOC’s response process, dynamics of sexual abuse, reactions of victims, and how to respond to a report of sexual abuse.</p> <p>Contract Staff Interviews – Three contract staff were interviewed from foodservice, medical and mental health. All three said they had received training that covered the policy for zero tolerance of sexual abuse and sexual harassment, how to detect and respond to incidents of sexual abuse or sexual harassment. All three said they would keep the inmates safe and with them until they could notify their supervisor and the Shift Supervisor.</p> <p>Volunteer Interview – The volunteer interviewed said he completes the PREA training annually. The training covers the zero-tolerance policy, rights of inmates and staff, and his responsibility if he receives a report of sexual abuse or sexual harassment from an inmate.</p> <p>c) Document Review – the PREA training completion documents were requested for eight medical contract staff, three food service contract staff and four volunteers. Training completion documents were received for four medical contract staff and the four volunteers. No training completion documents were received for four medical contract staff and three food service staff.</p> <p>CORRECTIVE ACTION REQUIRED: The facility must provide the training completion</p>

	<p>documents that are missing for the medical and food service contract staff or have the staff complete the training.</p> <p>Corrective Action Completed: The PREA training completion records were provided for the two foodservice contract staff showing the training was completed in 2023. The records of completion meet the provisions of this standard.</p> <p>The facility meets the provisions of the standard based on the information from interviews, policies and documents reviewed.</p>
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115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” The policy requires the facility to have the PREA offender brochure in several recognized languages. If the brochure is not available in the inmate’s language then an interpretive service will be utilized to provide the information. The PREA offender brochure was provided in seven additional languages. The policy also requires the facility to make PREA reporting information available or visible to all inmates through posters, the offender rulebook, tablets and the brochure. Policy requires the inmates to sign an acknowledgement receipt for viewing the video and receiving the PREA offender brochure.</p> <p>Inmate Interviews – Forty inmates were interviewed. Thirty-seven inmates said they received the PREA education information on the first or second day at the facility. All said they received a PREA brochure. Most said they were shown a video about PREA that provided information also. Staff explained the information and asked if they had any questions. Only three inmates said they did not get the information. All inmates interviewed said they see the PREA reporting information posters in the facility and the hotline number spray painted on the walls. All forty inmates knew several ways to make a report of sexual abuse or sexual harassment.</p> <p>Intake Staff Interview – The Case Manager that provides the PREA education at the Reception and Orientation Unit said he provides the PREA education information the first day or second day the inmates are at the facility. He shows the video at the intake area. He said he meets with the inmates individually to ensure they understand the information if they have disabilities. If an inmate is LEP, the facility can access a telephonic interpretive service. He also can provide the brochure in several other languages. If an inmate has a hearing disability, the video has closed</p>

	<p>captioning, and he can write questions to enable communication. If an inmate cannot read, he reads the information to them. He explains the zero-tolerance policy, inmate rights, anonymous reports to the Crime Victim Unit, calling the PREA hotline, telling any staff, writing any staff, and victim advocacy services available at the facility.</p> <p>Tour Observations - A PREA education could not be observed during the onsite audit. While touring the intake area, the PREA education process was explained by the PREA Site Coordinator/DW. PREA posters were observed throughout the facility in inmate housing units, program areas, recreation areas, dining hall, medical waiting area and inmate work areas. The posters provided information on how to report sexual abuse and sexual harassment and were printed in English and Spanish. They were placed at a height and in a print size that inmates could easily read. The PREA brochure was provided in both English and Spanish. The brochure provides inmates with information on what is an incident of sexual abuse or sexual harassment, the zero-tolerance policy for MODOC, prevention of sexual abuse, reporting sexual abuse and sexual harassment, and victim rights. The PREA hotline phone number was spray painted on the wall next to the inmate phones in large size letters that were easy to see.</p> <p>Document Review - Documentation for PREA education was requested for the forty inmates interviewed at the onsite audit. The documents were provided for review after the onsite audit at the time of the interim report. Intake dates for all inmates interviewed were also requested and have not been provided.</p> <p>CORRECTIVE ACTION REQUIRED: The facility must provide documentation of the intake date for all forty inmates and the missing PREA education documentation for review and determination of meeting the standard.</p> <p>Corrective Action Completed: Intake dates were provided for all forty inmates interviewed. The PREA orientation (education) completion documents were not provided for all forty inmates and eleven were either dated before the intake date or dated more than 30 days after intake. As a result, an additional sample of PREA education documents was requested for inmates arriving after the interim report date. Twenty inmates PREA education completion records from September 2024 were provided for review. All twenty were completed the same day as arrival. The practice was consistent with the standard and MODOC policy.</p> <p>The facility meets the provisions of the standard based on the interviews, policies and documents reviewed.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states

	<p>"Investigators assigned to investigate offender sexual abuse allegations shall receive specialized PREA investigator training." The policy reflects the provision's requirement.</p> <p>Training Curriculum - The NIC PREA: Investigating Sexual Abuse in a Confinement Setting was reviewed by this auditor. The training covers the investigation standards, Miranda, Garrity, evidence collection, forensic examinations, interviewing techniques,, understanding the victim, and evidence requirements for substantiating administrative cases or for making a prosecutorial referral. The curriculum covered the requirements of the standard.</p> <p>PREA Unit Investigator Interview - A PREA Unit Investigators was interviewed. The PREA Unit Investigator said she completed the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting and the advanced NIC investigations course. She has also completed sexual abuse investigation training through CJIS as well. The training covered rapport with the subject of the interview, empathy for the victim, open ended questioning, Miranda and Garrity, evidence collection, preponderance of evidence standard for administrative investigations.</p> <p>Document Review - The NIC PREA Investigations training certificates were provided for the ten PREA Unit Investigators that can conduct sexual abuse investigations in all MODOC facilities.</p> <p>The facility meets the standard based on the information from interviews, documents and policies reviewed.</p>
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115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Health services staff members shall receive specialized PREA medical and mental health training."</p> <p>Training Curriculum - The Centurian PREA Overview training curriculum was provided for review. The curriculum is medical contractor's specialized medical training that all medical and mental health staff complete. The curriculum comes from Relias training. The training curriculum provides information about what is sexual abuse and sexual harassment; how to detect and assess sexual abuse and sexual harassment; preserving physical evidence; how to respond and communicate with victims; how medical and mental health staff are to report any knowledge or suspicion of sexual abuse and sexual harassment. The training curriculum covers the requirements of this provision of the standard.</p> <p>b) Medical Staff Interview - The Health Services Director said she has completed</p>

	<p>specialized medical training through Centurian. She said all medical staff complete annual PREA training. The specialized medical training covers how to detect and assess signs of sexual abuse and sexual harassment, what medical staff can do to preserve physical evidence, responding to victims, and who to report allegations or suspicions to. She said she has also completed the PREA training for contract staff as well.</p> <p>Mental Health Staff Interview – The mental health staff said she receives specialized medical training through Centurian annually and has completed the PREA training for contract staff. The training has a trauma informed approach. The training covered protection of evidence, signs of sexual abuse, communication with victims, and reporting sexual abuse and sexual harassment.</p> <p>The facility reported two nurses being trained as SANE’s. The certificates of training completion were requested and have not been received as of the Interim report</p> <p>c) The facility was asked to provide documentation of the specialized medical training for eight randomly selected medical and mental health staff. The documents have not been provided. Though the staff said they received the training in interviews, the facility must provide training completion documentation.</p> <p>d) The facility provided documentation of PREA training completion for four out of eight randomly selected medical and mental health staff. The facility must provide documentation of the completion of training for the four staff or have the staff complete the training as required by the standard.</p> <p>CORRECTIVE ACTION REQUIRED: Provide documentation of completion for the specialized medical training for all selected medical and mental health staff. Provide documentation of PREA training completion for the seven medical and mental health staff.</p> <p>Corrective Action Completed: The PREA training completion documents and specialized medical training completion documents for all medical staff selected were provided for review. All PREA training documents showed completion per standard 115.32 The missing PREA specialized medical training completion documents were completed in late 2023. The medical contractor requires the medical staff to complete the specialized medical training annually.</p> <p>The facility meets the provisions of this standard based on information from interviews, policies and documents reviewed.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All offenders shall be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding offender housing assignments, transgender and intersex offenders and the probation and parole procedures regarding housing assignments, transgender and intersex clients, and contracted residential facilities." The policy requires an assessment for risk of victimization and abusiveness.

b) Missouri DOC policy IS5-2.3 Offender Internal Classification states "CCMs will conduct a new internal classification within the first 72 hours at that facility and the offender will be housed in accordance with the new internal classification score." The policy requires a new risk assessment to be completed within 72 hours of arrival at the facility.

Risk Screening Staff Interview - The staff that conduct risk screening said all inmates that arrive at WRDCC are screened within the first two days of arrival for risk of victimization and risk of abusiveness.

Inmate Interviews - Thirty five out of forty inmates said they could recall meeting with a Case Manager privately and being asked questions about prior victimization, sexual orientation, gender identity, disabilities, prior criminal history, prior conduct, and their views of vulnerability to sexual abuse in the first or second day in the intake area.

Document Review - Risk assessments documents were requested for the twenty inmates that were interviewed. Summary sheets were provided instead of the full risk assessment document. The full risk assessment document was requested a second time but seven have not been received as of the interim report.

c) Missouri DOC policy IS5-2.3 Offender Internal Classification states "Facilities shall assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities." The risk assessment was provided for review. The factors in the assessment were found to be objective.

d) Risk Screening Staff Interview - The staff that complete the risk screening said he provides the assessment questions to the inmate on a form and then he meets with inmates in private in the intake area to go over the questions to gather information to complete the risk screening. The questions are about prior sexual abuse victimization; prior sexual abuse perpetration; feelings of vulnerability to sexual abuse; cognitive and physical disabilities; identifies as or is perceived to be LGBTI or gender nonconforming. He also reviews the inmate record for additional information on criminal history, conduct history for violence or sexual abuse, age, size description, sex offenses, and violent offenses. If the inmate does not have a complete record, he will ask more questions about their criminal history and conduct

history.

Document Review - The Internal Classification Risk Assessment was reviewed and found to assess risk of victimization for the following factors: disabilities, age, inmate build, prior incarceration, prior conviction for sex offense with a Child victim, LGBTI or Gender non-conforming, prior victim of sexual abuse, and perception of vulnerability.

Inmates are not detained solely for civil immigration in the MODOC. The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet this provision of the standard.

e) Document Review - The Internal Classification Risk Assessment was reviewed and found to assess risk of abusiveness for the following factors: prior sexual abuse – prior conviction for sex offense with Adult victims; prior convictions for violent offenses – prior convictions for violent crimes; history of prior institutional violence or sexual abuse – conduct for violent offenses past 10 years and conduct violation for murder or forcible sexual conduct older than 5 yrs but less than 10 yrs. Though there is assessment for prior sexual abuse involving adults, not assessing for sex offense convictions with child victims does not assess for any or all prior sexual abuse. The time restriction on forcible sexual conduct prevents assessing for that conduct that is outside of the timeframe. This doesn't assess for all prior sexual abuse while incarcerated. This does not meet this provision of the standard.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be reassessed within 30 days of arrival. The reassessment shall consider additional relevant information received by the facility after the initial intake screening."

Risk Screening Staff interview – The same staff that completed the intake risk assessment also completes the re-assessment. He said he meets with inmates a few weeks after intake to complete the reassessment of the risk screening. He asks the inmates if anything changed from the first time he asked them questions at intake.

He does not meet with them individually in private. He completes a whole new assessment based on the inmate's answer and the information from the inmate record. FAQ for standard 115.41 from August of 2019 requires the staff to ask the inmate reaffirming questions about perception of vulnerability, victimization, sexual orientation and gender identity. Because of the nature of these types of questions, the meeting must be conducted in a private setting.

Inmate Interviews – Most inmates said they were not asked the same questions from the intake meeting a second time. Some recalled being asked if anything changed.

Document Review – Re-assessments were requested for Twenty inmates. A summary page was provided that did not show the details of the assessment. A second request was made for the full reassessment to be provided for review. Seven have been received as of the interim report.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender's risk level shall be reassessed when warranted due to a referral,

incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness.”

Risk Screening Staff Interview – Staff said if new information is received that changes the answers to the last screening, a new assessment is completed. If there is a substantiated incident of sexual abuse, a Case Manager will do a new assessment as well.

h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The offender shall not be disciplined for refusing to answer or not disclosing complete information during the assessment.”

Risk Screening Staff Interview – Staff said inmates do not have to answer the questions for the risk screening and refusing to answer will not result in discipline.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The chief administrative officer (CAO) or PREA site coordinator shall control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders.”

PREA Coordinator Interview – The PREA Coordinator said information obtained for the risk assessment is confidential and access to the electronic system the assessments are completed in is controlled and limited to the staff that need to complete assessments and the staff involved in reviewing them.

CORRECTIVE ACTION REQUIRED: Twenty risk assessments were reviewed for targeted inmates. The intake dates were not provided for the twenty records and seven were not provided for review. The internal classification risk assessment does not assess for prior conviction for sex offenses against an Adult or prior convictions being exclusively non-violent. The screening for risk of victimization does not meet provision (d). There is assessment for prior sexual abuse involving adults, not assessing for sex offenses with child victims does not assess for any or all prior sexual abuse. This does not meet provision (e). Some reassessments were found to be completed beyond 30 days. Provision (f) is not being followed at times and assessments will need to be reviewed for completion within proper time frames. The internal classification risk assessment must be modified to meet provision (d) and (e). Once the modification is approved, completed intake and 30-day reassessments must be provided for review that are completed within the required time frames in the standard. Staff that conduct the reassessment must be directed to meet individually with the inmates in private to ask reaffirming questions at the reassessment.

Corrective Action Completed: The intake dates were provided for the inmates selected for assessment review at the onsite audit. Four out of thirteen intake assessments were not completed within 72 hours and three out of thirteen reassessments were not completed within 30 days. A new sample of assessments was reviewed for correct time frames during the corrective action period.

The MODOC PREA Coordinator and Director of Office of Professional Standards said

	<p>the risk assessment is completed in an electronic computer system that will take more time to modify than is allowed in the corrective action period. As a result, an agreed upon corrective action was developed. The process to complete the assessment was modified by using comment sections in the current assessment to document changes in what is being assessed on specific factors until the MODOC can make permanent changes to the assessment in the electronic system. There were changes to five factors being assessed on the current assessment that had been identified as not meeting the standard.</p> <ul style="list-style-type: none"> • Adult victim was added to victimization question 14 for prior sex offense convictions. A comment will be added for scoring Adult victim in addition to the current Child victim. • Exclusively non-violent criminal history factor in the victimization section will be scored as an override when the answer is No to question 17 in the risk of abusiveness section that scores convictions for crimes of violence. If the answer is No and the victimization section score is 2 points, the staff will complete an override to a Sigma (risk of victimization) in number 20 for the inmate having a non-violent criminal history. Non-violent criminal history will be placed in the comment section. • Child victim was added to risk of abusiveness question 16 in addition to Adult victim. The comment Child Victim is added if the answer is Yes and the victim is a child. • Staff were instructed not to follow the time limitations on questions 18 and 19. A Yes response will be given for any institutional conduct history for violence or sexual abuse with comments added to document the information being outside of the time frames. <p>The changes were added to the training manual for the risk assessment and training was provided to the staff that complete risk assessments at WRDC on August 30, 2024, by the PREA Unit Manager (PC). The new assessment process was put in place at WRDCC following the training. A sample of 72-hour intake assessments and 30-day reassessments completed during September were provided for review each week. A total sample of twenty intake assessments and twenty-one reassessments were reviewed for use of the new process. All were completed in the correct time frames and using the new process for scoring. The MODOC will continue to work on the changes in the electronic risk assessment that makes these changes permanent.</p> <p>The facility meets the provisions of this standard based on information from corrective actions, interviews, policies and documents reviewed.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This shall be in accordance with the institutional services procedures regarding offender housing assignments, transgender and intersex offenders, offender recreation and activities, and probation and parole procedures regarding community supervision centers, the community release center, and contracted residential facilities."

Missouri DOC policy IS5-2.3 Offender Internal Classification states "The department utilizes an internal classification system to assist department staff members in determining appropriate housing, programs, and work assignments of offenders to ensure offender safety, institutional security, and compliance with the Prison Rape Elimination Act (PREA) guidelines." This policy provides the procedures for completing the PREA risk assessment. The risk assessment is used to guide the placement of inmates in housing assignments and programs. Inmates that are high risk of victimization (Sigma) are not housed in the same room with inmates that are high risk of abusiveness (Alpha).

Missouri DOC policy IS18-1.1 Required Activities requires housing unit staff to utilize internal classification information to designate required assignments for the purpose of keeping separate and/or ensuring appropriate monitoring of inmates at high risk of being sexually victimized from inmates that are at high risk of being sexually abusive when working or attending programming together.

The policies meet the requirements of this provision of the standard.

PREA Compliance Manager Interview – The PREA Site Coordinator said the Sigmas are housed on their own wings and Alphas are housed on other wings. They are never in the same rooms. The Functional Unit Manager runs a report with the flags from the offender information system to monitor for correct placement weekly.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive."

c) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee is responsible for determining a permanent housing assignment for each transgender or intersex offender, and prior to this assignment shall meet with each offender to determine his vulnerability within the general population and length of time living as the acquired gender. Transgender and intersex housing assignments shall not be made based solely on genitalia but must consider the offender's health and safety and the security of the facility through a review of the respective classification, medical and mental health records."

Missouri DOC policy IS5-3.3 Transgender and Intersex Offenders provides the process

for review of an offender that has identified as transgender or intersex at the risk assessment. The staff that conduct the risk assessment notify the PREA Site Coordinator of the transgender or intersex identification. The Transgender Committee is consists of the PREA Site Coordinator, medical administrator, mental health chief, medical director. The Transgender Committee has an initial meeting with the offender. The offender then meets with Mental Health to be reviewed for gender affirming items, hormone therapy treatment consideration, and discuss health and safety concerns. The Transgender Committee completes the Transgender Committee Review form and forwards it to the Transgender Review Team in central administration. The Transgender Review Team consists of the PREA Coordinator, deputy division director, director of rehabilitative services.

PREA Compliance Manager Interview - The PREA Site Coordinator said the facility has a facility transgender committee that meets with an inmate that identifies as transgender at the risk assessment or at any time while housed at WRDCC. The committee consists of the medical and mental health directors, classification staff and unit management staff. The committee reviews the transgender inmate's views of safety in the facility housing placement and program/work assignments. The committee also reviews gender affirming items, showering separately and the potential for hormone therapy. He said the Transgender Committee Review form is completed and sent to the Transgender Review Team in central administration for review and final decision.

Documentation of Transgender Committee Reviews was requested for two inmates that identified as transgender during the interview for the risk assessment. The facility committee consisted of the PREA Site Coordinator, medical DON, a Doctor, and Mental Health Chief. The Transgender Review Team consisted of the PREA Unit Manager, Deputy Division Director and Director of RS.

d) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee shall meet with the offender within 10 working days of either the offender's arrival to the facility or upon learning the offender's transgender or intersex status and every 6 months thereafter."

e) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee review shall include the following: (1) Offender's view of his vulnerability."

Transgender Inmate interview - Two transgender inmates were interviewed. Both inmates said the Transgender Committee asked for their views of safety regarding their facility and housing placement. Both inmates said they felt safe in their placement at WRDCC.

f) PREA Compliance Manager - The PREA Site Coordinator (DW) said the Transgender Review Committee asks transgender inmates if they want to shower while other inmates in the housing unit are in their cells.

Transgender Inmate Interview - Both transgender inmates said separate showers was offered and chose not to shower separate.

	<p>g) Inmate Interviews – Two transgender and one gay inmate said they are not housed in a unit that is dedicated to transgender, gay or bisexual inmates.</p> <p>The facility meets the standard based on information from interviews, documents and policies reviewed.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.”</p> <p>MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30-day review.</p> <p>The facility reported no inmates being placed involuntarily in segregation for risk of victimization during the last 12 months. There was no documentation to review.</p> <p>Staff Who Supervise Segregation - A Unit Manager that supervises the segregation unit was interviewed. He said if an inmate is placed in segregation involuntarily the reason would be documented in the inmate confinement report (TASC) along with the restrictions. A review of placement in administrative segregation is completed during the first week at a classification hearing where alternate placement in general population will be considered and offered to the inmate. The involuntary placement will be reviewed again at 30 days. The review will document that there are no alternative housing options and the restrictions while in segregation. He said the goal is to get the inmate back into population within 5 days or place them on protective custody status. If an inmate cannot be placed safely in open population, they can review the possibility of transfer to another facility. He said some program course work can be completed while in segregation. Most privileges would be restricted.</p> <p>Warden Interview – The Warden said if an inmate is determined to be at high risk for sexual abuse from the assessment at intake, the intake staff would try to find the safest housing assignment in general population. Involuntary segregation would only be used as a last choice. A transfer to another facility would be considered if the inmate cannot be in the general population.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>

115.51	Inmate reporting
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 338 1476 752">a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request (IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline, and d. advocacy agency.” The methods of reporting are communicated to inmates in the PREA offender brochure provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC, report to any staff, or calling the PREA hotline.</p> <p data-bbox="256 786 1453 947">Random Staff Interviews – Staff said inmates can report sexual abuse, sexual harassment or retaliation by calling the PREA hotline, telling any staff, writing any staff, filing a grievance, or having family make the report. Most knew inmates could write to the Crime Victims Unit and be anonymous.</p> <p data-bbox="256 981 1481 1312">Inmate Interviews – All inmates said they can report retaliation, sexual abuse or sexual harassment by telling any staff, writing staff by dropping a “kite” in the mailbox on the housing unit or calling the PREA hotline. Most thought they could make an anonymous report by not putting their name on the written report and dropping it in the mailbox for general mail. Some were aware of the anonymous report to an external organization they saw on a poster. Inmates said they could file a grievance to report. All inmates were aware of multiple ways to make a report of retaliation, sexual abuse or sexual harassment.</p> <p data-bbox="256 1346 1476 1637">Tour Observations – PREA posters with information telling inmates how to make a report of sexual abuse and sexual harassment were observed in every housing unit dayroom next to the inmate phones, recreation areas, the dining hall, education hallway, library, and clothing issue at intake. The information was also posted in areas where inmates wait for commissary orders or medical appointments. The PREA hotline phone number was spray painted on the walls next to the inmate phones in large letters that are easily read. The information is also on the inmate tablets.</p> <p data-bbox="256 1671 1445 1962">b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail and not subject to examination.” The policy requires an external reporting method that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure.</p> <p data-bbox="256 1995 1469 2074">PCM Interview – The PREA Site Coordinator/DW (PCM) said inmates can report to the Department of Public Safety by writing to the address on the posters and in the PREA</p>

	<p>brochure. This correspondence is treated as privileged and cannot be read or censored. Inmates can leave their name off the envelope and correspondence if they want to remain anonymous. The mailroom staff will let it go out in the mail.</p> <p>Document Review – the facility provided a copy of the MOU between the Missouri DOC and the Missouri Department of Public Safety that was signed in 2013 and is ongoing until it is deemed unnecessary by either party. The MOU provides the responsibilities for each organization in receiving and processing written correspondence from MODOC inmates and residents regarding allegations of sexual abuse and sexual harassment. The MOU requires the correspondence to be immediately forwarded to the DOC, allowing the inmate to remain anonymous.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure.”</p> <p>Random Staff Interviews - Staff said they are required to take any verbal, written, anonymous or third-party report. When they receive a verbal report, they are required to document the report and the steps they follow providing the information as required in a written incident report. This report must be turned in immediately or prior to leaving the shift.</p> <p>Inmate Interviews – Inmates said they can make a report privately by calling the PREA hotline or requesting to meet with their Case Manager and tell them in private.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct.” The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.</p> <p>Random Staff Interview – Staff said they could privately report information about retaliation, staff not reporting or knowledge or suspicion about an incident of sexual abuse or sexual harassment by calling the ethics line or the PREA hotline. They could also complete an IOC and email it to a supervisor or talk to their supervisor in private. Posters for the ethics line (CLEAR Line) were observed in staff dining area and PREA Hotline posters are throughout the facility.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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Auditor Overall Determination: Meets Standard

Auditor Discussion

b) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not impose a time limit on when an offender may submit a complaint regarding an allegation of offender sexual abuse.” “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.” “Nothing in this section shall restrict the agency’s ability to defend against an offender lawsuit on the ground that the applicable statute of limitations has expired.” The policy allows for any complaints regarding sexual abuse to bypass the informal process and proceed immediately to grievance stage.

The facility provided a report generated from the Grievance Management System that indicates there were seven grievances regarding sexual abuse in 2023.

Documentation was provided of the sexual abuse allegation being referred for investigation. There were no sexual abuse allegations reported via grievance noted in the twenty investigations reviewed out of the forty-five investigations during the review period.

c) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.”

d) Missouri DOC policy D5-3.2 Offender Grievance states “Offender grievances alleging sexual abuse shall be processed as follows: If determined to be a non-emergency the CAO or designee shall respond within 30 calendar days of receipt. Non-emergency offender grievance appeals alleging offender sexual abuse shall be processed as follows: a response shall be provided as soon as practical, but no later than 60 calendar days of receipt. Computation of the 60 day time period shall not include the days between the offender’s receipt of the offender grievance response and receipt of the offender grievance appeal by the offender grievance unit at central office. Appeals shall be referred to the deputy division director or designee. An extension of time to respond, of up to 70 calendar days, may be claimed if the normal time period for response is insufficient to make an appropriate decision. The offender shall be notified in writing of such extension and shall be provided a date by which a response shall be provided. During the administrative process, including the offender grievance appeal level, if the offender does not receive a response within the time allotted for a reply, including extension, the offender may proceed to the next level of the offender grievance process.”

There were no sexual abuse or sexual harassment investigations where the inmate reported through a grievance.

e) Missouri DOC policy D5-3.2 Offender Grievance states “Third Party Reporting: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, shall be permitted to assist offenders in filing requests for grievances or appeals relating to allegations of offender sexual abuse. This assistance

	<p>cannot interfere with the safety and security of the institution. When a staff member receives the documentation from the reporting third party, it shall be attached to the grievance form and shall immediately be recorded in accordance with this procedure. A copy of the documentation shall also be forwarded to the CAO or designee in order to be attached to the possible investigation or inquiry. The CCM shall attempt to discuss the issue with the offender (victim) prior to developing a response to confirm if the alleged victim agrees to have the request filed on his behalf. If the offender declines to have the request processed on his behalf, the CCM shall document the offender's decision and the complaint shall be considered withdrawn for grievance purposes."</p> <p>f) Missouri DOC policy D5-3.2 Offender Grievance states "If the CAO or the PREA site coordinator determines that the complaint meets the definition of a PREA emergency grievance, the grievance shall be addressed as follows: The CAO or designee shall prepare an initial response which shall be attached to the grievance and provided to the offender within 48 hours of receipt of the initial filing date. The offender shall sign and date the response. A final response from the CAO or designee shall be provided to the offender within 5 calendar days from the initial filing date. The offender shall sign and date the form. The initial and final response for the grievance shall document the department's determination whether the offender is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance."</p> <p>The facility reported on the PAQ and through a memorandum from the PREA Site Coordinator that no emergency grievances were received in the last 12 months.</p> <p>g) The facility reported no disciplinary action against an inmate for filing a grievance alleging sexual abuse in the past 12 months.</p> <p>The facility meets this standard based on the information from interviews, documents and policies reviewed.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall offer alleged victims of offender sexual abuse, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, during the investigative process. When an allegation of sexual harassment is forwarded for investigation, the alleged victim of sexual harassment will be offered a victim advocate. Offenders shall be allowed to communicate with an advocate by mail or special visit in a confidential manner as possible to maintain safety and security of the institution."</p>

A letter of agreement between WRDCC and the YWCA St Joseph was provided for review. The agreement was signed in February 2024 and outlines the victim advocate services to be provided by the YWCA Survivor Support Services to inmates at WRDCC. The services include emotional support services to victims of sexual abuse and an advocate to support an inmate during a medical examination.

Inmate Interviews - Inmates were aware there were services available for victims of sexual abuse through the victim advocate staff at the facility. Most inmates knew there might be a victim advocate organization outside of the facility that they could write to that they see on posters.

Tour Observations - During the tour, Victim Advocate posters were observed in housing unit dayrooms and other areas inmates frequent. The posters contain the addresses for Just Detention International and Rape, Abuse and Incest National Network.

Staff Victim Advocate Interview - A victim advocate qualified staff said he completed an online training. He is notified by the shift supervisor if there is an incident of sexual abuse reported and will report to the facility during off hours. He said the training covered victim care and covered the process of the forensic examination.

Conversations with the victim are confidential unless there is information provided that is a safety or security concern. He said he can provide victim advocate services for a forensic exam at the facility or at the hospital. He also provides victim advocate services for the victim during investigator interviews if requested.

Victim Advocate Interview - A victim advocate from the YWCA was called to conduct to verify the MOU with WRDCC. The YWCA staff said there would be training provided to staff and residents can call a hotline for services. If a VA needs to see a resident, they will arrange a special visit through the PREA Site Coordinator. She said the YWCA will provide victim advocate services to residents at a forensic examination or at the investigator interview at WRDCC.

This auditor contacted Just Detention International to ask if correspondence has been received from an inmate at the Western Reception Diagnostic Corrections Center during the review period. A response was received stating there had been no correspondence received from an inmate at WRDCC.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Before being given access to a victim advocate, the offenders shall be informed of the extent to which communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory reporting laws."

Document Review - Victim Advocate posters have a statement at the bottom informing inmates that letters to the victim advocate organizations are subject to examination by staff.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "If a facility is unable to enter into a MOU with the advocacy center, the attempt shall be

	<p>documented and advocacy services shall be provided by a qualified staff member.”</p> <p>PREA Coordinator Interview – The PREA Coordinator said he is communicating with the Missouri Coalition Against Domestic Violence to attempt to obtain an MOU for victim services for all Missouri DOC facilities through correspondence or a hotline.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Facility Tour - Posters were observed during the tour in the visiting room that provide visitors with information for reporting sexual abuse and sexual harassment to the PREA Unit of the Missouri DOC. The mailing address, email address and telephone number are on the poster. The poster informs family and friends that the MODOC has zero tolerance for sexual abuse and sexual harassment. The poster says “Friends, family or anyone outside of the facility may report sexual abuse or sexual harassment for an offender.” These posters were also observed in the dayrooms of all housing units.</p> <p>MODOC PREA Webpage – The Missouri DOC PREA webpage provides information under the Friends and Family section for reporting sexual abuse and sexual harassment by calling, writing or emailing. This was observed at https://doc.mo.gov/programs/PREA.</p> <p>Inmate Interviews – Inmates said their family could report an incident of sexual abuse or sexual harassment for them by calling the number in their PREA brochure. Some said they see posters that say their family can report and how.</p> <p>A test report was sent on the PREA email prior to the onsite audit. A message was received back in two days acknowledging the message was received the same day it was sent. A test report was made to the PREA hotline after the onsite audit. The Missouri DOC PREA Coordinator emailed back acknowledging receiving the call within 24 hours.</p> <p>The facility meets the standard based on information from observations and interviews.</p>

115.61	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p>

Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Failure to report offender sexual abuse is a Class A misdemeanor in accordance with Missouri state statute. All staff members, shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure." The facility provided a copy of the law in the PAQ.

Staff Interviews - Staff said they are required by state law to immediately report any knowledge or suspicion of sexual abuse or sexual harassment of an inmate or retaliation against an inmate or staff must be reported by state law. They also said they would have to report if they were aware of staff failing to report.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions."

Staff Interviews - All staff said any information from a report of sexual abuse or sexual harassment could not be shared with co-workers or staff that are not involved in the response to or investigation of the incident.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Medical and mental health staff members shall inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes."

Medical Staff Interview - Medical staff said inmates are notified of their duty to report any information the inmate reveals about an incident of sexual abuse that occurred in a correctional institution. They have the inmate sign a form at intake that tells them about the duty to report and limits of confidentiality.

Mental Health Staff Interviews - Mental Health staff said they notify inmates of their duty to report information about sexual abuse in an institution each time they provide services.

Document Review - PREA Healthcare Duty to Report forms were provided for review for ten inmates received during the review period. The form documents the notice to inmates that medical and mental health staff have a duty to report any report of sexual abuse and sexual harassment that occurred in an institution to medical or mental health staff during the initiation of services.

Investigation Review - A review of investigations found one investigation of sexual abuse was reported to mental health staff and one was reported to medical staff. The staff immediately provided the information to security staff as required.

d) A search of the internet found reports of sexual abuse of a vulnerable adult must go to Adult Protective Services at the Department of Health and Senior Services.

	<p>PCM Interview – The DW PREA Site Coordinator said sexual abuse incidents involving an inmate under 18 must be reported to Social Services and sexual abuse of a vulnerable adult must be reported to Senior Services.</p> <p>e) Warden Interview – The Warden said all reports of alleged sexual abuse are referred for investigation to the PREA Unit. All allegations of sexual harassment are referred for investigation to WRDCC Institutional Investigator.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>
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115.62	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, shall immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist.” The facility reported zero incidents of imminent risk of sexual abuse in the past 12 months.</p> <p>Agency Head Interview – The Division Director said the facility would immediately remove an offender from a situation that is a substantial risk of imminent sexual abuse. The facility could move the offender to another work, program, housing assignment or place the offender in protective custody and transfer to another facility.</p> <p>Warden Interview – The Warden said if they learn an inmate is in imminent risk of sexual abuse, staff are instructed to stay with the inmate, the shift supervisor will immediately identify the alleged perpetrator and remove them from the alleged victim that made the report. If the perpetrator cannot be identified, the inmate that reported may have to be moved. They try to keep the inmate victim in the least restrictive housing if they can.</p> <p>Random Staff Interview – All staff said if an inmate reported an incident of sexual abuse or being in imminent risk of sexual abuse, they would immediately take the inmate to a safe place and stay with him while they report to their supervisor and the shift supervisor.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Upon receiving an allegation that an offender was sexually abused while confined at a facility outside of the department, the CAO or designee or the appropriate office shall ensure the outside facility is notified of the allegation within 72 hours. The CAO or designee shall maintain documentation of the allegation received and when the outside facility was notified with the allegation."</p> <p>Warden Interview - The Warden said if an inmate reports an allegation of sexual abuse that occurred at another facility, she would have the DW/PREA Site Coordinator send the information to the other facility head for their investigation within 72 hours. The inmate would be offered medical and mental health services, victim advocacy services and be monitored for retaliation. The facility would assist investigators at the other facility/agency by arranging an interview with the alleged victim.</p> <p>Document Review - the facility provided documentation of ten reports of sexual abuse that happened at another facility from inmates at WRDCC. The reports were communicated to the other facility within 72 hours of receiving them.</p> <p>d) Warden Interview - The Warden said if she receives a report about an incident of sexual abuse that occurred at WRDCC from another facility head that was reported by a former WRDCC inmate, she will follow normal procedures and assign it for investigation.</p> <p>Investigation File - Documentation of two investigations of sexual abuse reported by former WRDCC inmates while at another facility were part of the twenty investigations reviewed. The investigations were conducted in accordance with the standards the same as investigations of allegations received from inmates at WRDCC.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "In the event of an allegation of a penetration act, the first responder shall take the following steps: (1) Ensure the safety of the victim. (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when</p>

	<p>applicable. (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (4) The shift supervisor shall make telephone notifications and respond as outlined in the facility's coordinated response to offender sexual abuse protocol."</p> <p>Random Staff Interviews - Security Staff said if an inmate reports being sexually assaulted they would instruct the victim to not change clothes, shower, brush teeth, eat drink, smoke or use the restroom in order to protect evidence from being destroyed. Non-security staff said they would instruct the victim not to change clothes, shower, brush teeth, eat drink, or use the restroom to protect evidence from being destroyed. They would then notify security staff, specifically the shift commander's office and wait for security staff to come take custody of the inmate. All staff said they would separate the victim from other inmates and keep him safe. If the scene was determined, they would notify the Shift Commander so other staff could be sent to protect it.</p> <p>The facility reported on the PAQ thirty-two allegations of sexual abuse during the last 12 months. There were thirteen investigations of sexual abuse reviewed that occurred during the review period. Two of the allegations were made to security staff that separated the inmate victim from the perpetrator. One allegation of sexual abuse was made in a time frame that allowed for the collection of physical evidence. Security staff first responders protected evidence on the victim. Non-security staff were the first responders to eight allegations of sexual abuse. In all incidents, non-security staff notified security staff of the allegation. One allegation of sexual abuse was reported when the inmate victim was at another facility.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The facility uploaded a revised coordinated response. The document is WRDCC's institutional plan to coordinate staff actions in response to an incident of sexual abuse. The plan provides basic roles to staff first responders, medical and mental health staff, the Shift Commander, PREA Site Coordinator, victim advocate staff, and the Chief Administrative Officer or designee. The plan also covers staff response to allegations of penetration and non-penetration incidents of sexual abuse.</p> <p>Warden Interview - The Warden said the facility has a coordinated response plan for allegations of sexual assault and sexual abuse. The plan is specific to Western Reception Diagnostic Correctional Center and informs staff of their responsibilities in response to allegations of sexual abuse.</p>

	The facility meets this standard based on information from the interview and plan reviewed.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) MDOC policy D2-11.6 Labor Organization states “Per the Prison Rape Elimination Act, the department shall not enter into or renew any collective bargaining agreements or other agreements that limit the department’s ability to remove alleged staff sexual abusers from contact with any offender or resident pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.”</p> <p>Agency Head Interview – The designee for the MODOC Director said the Missouri DOC does have an active bargaining unit agreement, but it does not limit the agency’s ability to remove staff alleged to have committed sexual abuse away from inmates during the investigation the same as other staff.</p> <p>PREA Coordinator Interview – The PREA Coordinator said the Missouri DOC has a collective bargaining agreement for staff, but it does not prevent the removal of staff from contact with an offender that alleged sexual abuse by the staff. He said the agreement may have expired and has not been renewed.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA site coordinator shall ensure victims, individuals who report sexual abuse, and those that cooperate with offender sexual abuse investigations are monitored and protected from retaliation.”</p> <p>Document Review – Documentation of retaliation monitoring for eighteen investigations were provided for review. Staff conducted retaliation monitoring for inmate victims in eleven allegations of sexual abuse and seven allegations of sexual harassment.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires the PREA Site Coordinator to offer emotional support services to offender victims,</p>

witnesses, reporters, staff reporters and staff witnesses.

Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.

Warden Interview – The Warden said she has staff designated to monitor for retaliation. If retaliation is suspected, the person retaliating will be separated from the inmate victim. An inmate that is determined to be retaliating may be moved away from the inmate victim or transferred to another facility. Staff suspected of retaliation can be reassigned away from the inmate or put on temporary suspension. If it is determined staff are retaliating progressive discipline will be used up to termination.

Retaliation Monitoring Staff – The staff that conduct retaliation monitoring said he is assigned monitoring when the monitoring form is emailed to him. He said he has an initial meeting with the inmate victim. He informs the inmate he will meet with them every 30 days and they can contact him between meetings if they have concerns about retaliation.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The alleged victim of offender sexual abuse shall be monitored for a minimum of 90 days to assess any potential risk or act of retaliation. The assessment-retaliation status checklist form shall be used during each of the assessment interviews. If the victim expresses fear of retaliation, monitoring shall continue for an additional 90 day period or until the victim or reporter is no longer in fear of retaliation or if the investigation is unfounded.”

Retaliation Monitoring Staff Interview – The staff that monitors retaliation said he conducts monitoring for 90 days. He reviews inmate conduct, program assignments, housing assignment changes, and work assignment changes. If he suspects retaliation, he immediately reports the retaliation to his supervisor, the PREA Site Coordinator and the facility investigator. He can continue monitoring beyond 90 days if needed due to individual circumstances.

Document Review – Documentation of retaliation monitoring for eighteen investigations were provided for review. Staff conducted retaliation monitoring for inmate victims in eleven allegations of sexual abuse and seven allegations of sexual harassment. The monitoring for sexual abuse investigations involved periodic meetings with inmates for 90 days or until the investigation was determined to be unfounded. The monitoring for sexual harassment investigations involved one or two meetings with the inmate victim.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Monitoring shall include face-to-face status checks.”

Retaliation Monitoring Staff Interview - The staff that conducts monitoring said he meets with the victim every 30 days.

	<p>Document Review – Documentation of retaliation monitoring for eighteen investigations were provided for review. Staff conducted retaliation monitoring for inmate victims in eleven allegations of sexual abuse and seven allegations of sexual harassment. The monitoring for sexual abuse investigations involved periodic meetings with inmates for 90 days or until the investigation was determined to be unfounded. The monitoring for sexual harassment investigations involved one or two meetings with the inmate victim.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Reporters and witnesses shall be monitored for retaliation at the minimum of one time utilizing the assessment-retaliation status checklist form. If no retaliation is reported, monitoring will cease.”</p> <p>CORRECTIVE ACTION REQUIRED: Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims. Provide the policy change and documentation of the change in policy and practice being communicated to all PREA Site Coordinators.</p> <p>Corrective Action Completed: The Agency has updated policy D1-8.13 Offender Sexual Abuse and Harassment to now include third-party inmate reporters in face-to-face monitoring meetings for 90 days, aligning with the existing monitoring requirements for inmate victims. Staff who report sexual abuse will undergo 90 days of monitoring and receive a flyer detailing how to report any retaliation to the Warden, PREA Hotline, CLEAR line, PREA Email, or the Office of Professional Standards email. Offenders or staff who cooperate in a sexual abuse investigation as witnesses and express concerns about retaliation will be evaluated and protected from retaliation. This policy revision and its implementation were communicated to the PREA site Coordinators (PCM) by the PREA Unit Manager (PREA Coordinator) on August 23, 2024, via email.</p>
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115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Following an allegation of offender sexual abuse or if an offender is assessed as being at high risk of victimization, the shift supervisor shall ensure the offender is housed in the least restrictive housing available to ensure safety. When an offender is believed to be in substantial risk of victimization, the shift supervisor shall assess the offender to ensure housing in the least restrictive housing. If segregation is determined to be the least restrictive housing the shift supervisor shall note on the</p>

	<p>TASC order the offender is being placed in segregated housing due to a PREA risk. The PREA site coordinator shall review all PREA notification checklists the following business day to ensure appropriate housing placement.” MODOC policy IS21-1.2 requires an initial review of administrative segregation status and then a 30 day review.</p> <p>The facility reported zero inmates were placed in administrative segregation involuntarily after reporting sexual abuse during the reporting period. There were no inmates in segregation involuntarily at the time of the onsite audit for reporting sexual abuse.</p> <p>Warden Interview – The Warden said inmates that report an incident of sexual abuse would remain in open population housing. If it is not safe for them to remain in open population, he could be placed in administrative segregation until a safe housing alternative can be found. A transfer would be pursued if there was no safe alternative housing in general population at WRDCC.</p> <p>Staff that Supervise Segregation – A Unit Manager said he has not had an inmate involuntarily placed in segregation after reporting an incident of sexual abuse. He said the inmate confinement record (TASC form) documents the reason for placement in segregation as the only alternative and the restrictions to privileges, work and programs. A review is conducted in the first week and then at 30 days.</p> <p>The facility meets this standard based on the information from interviews and policies reviewed.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she is immediately contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Facility Investigator – The Facility Investigator said he investigates only sexual harassment allegations. Any allegation that is unclear what type of incident it is, he will do an initial review to determine the type of incident. He said it takes one or two</p>

working days to initiate an investigation for a sexual harassment allegation.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Investigators shall receive specialized PREA investigation training prior to conducting an investigation involving offender sexual abuse." The PREA Unit Investigators conduct all of the sexual abuse investigations

PREA Unit Investigator - The PREA Unit Investigator said she has completed the NIC Sexual Abuse Investigations in a Confinement Setting, the NIC Advanced Sexual Abuse Investigations training and training by VAWA online.

Document Review - NIC training certificates were provided for 12 investigators in the PREA Unit that complete sexual abuse investigations.

c) PREA Unit Investigator Interview - The PREA Unit Investigator said she receives a Request For Investigation from the facility and the PREA Notification Checklist when there is a clear sexual abuse allegation. The PREA Unit Investigators conduct the administrative and criminal investigations for sexual abuse. She reviews the initial information, reviews video evidence if available, conducts a background investigation of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident. The facility will assist by protecting the scene and the SANE staff collecting evidence through a forensic examination.

d) PREA Unit Investigator Interview - The PREA Unit Investigator said they do not conduct compelled interviews. If a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it certified mail to document the referral.

e) PREA Unit Investigator Interview - The PREA Unit Investigator said she is not allowed to subject the victim to a truth telling device. The subject of the investigation could be asked to complete a voice stress analysis. She determines the subject's credibility on a case-by-case basis from the background review of prior criminal history, PREA investigations and conduct.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Administrative investigations shall include an effort to determine whether staff member actions or failure to act contributed to the abuse."

g-h) Investigation File Review - Twenty investigations were reviewed out of the forty-five investigations reported by the facility. There were no criminal investigations conducted during the review period. All investigations reviewed were administrative investigations. The investigations contained a thorough description of physical, testimonial, and documentary evidence. The three investigations that were substantiated staff sexual abuse did not appear to be criminal violations however they fit the PREA standards definition of staff sexual misconduct.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Inquiries regarding offender sexual abuse and harassment and all supporting

	<p>documents shall be retained as long as the alleged perpetrator is incarcerated or employed with the department, plus 5 years and in accordance with the department procedure regarding records retention.”</p> <p>j) PREA Unit Investigator – The investigator said when a staff that is the subject of an investigation leaves employment prior to interview, she will obtain contact information from human resources and call to request the staff come back to the facility for an interview or interview them on the phone. If they refuse to answer, she will make several attempts before moving on with the investigation.</p> <p>The facility meets the standard based on the information from the investigation files reviewed, interviews and policies reviewed.</p>
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.”</p> <p>Facility Investigator Interview – The Facility Investigator said he uses the evidence standard of preponderance of evidence for administrative investigations he conducts for sexual harassment. He said that means it is more likely than not that the allegation happened as reported.</p> <p>PREA Unit Investigator Interview - The PREA Unit Investigator said she uses the preponderance of evidence standard for the administrative investigations of sexual abuse. More than 50% of the evidence supports substantiated.</p> <p>Investigation Review – Twenty administrative investigations were reviewed. There were three substantiated investigations that were based on a preponderance of evidence standard.</p> <p>The facility meets this standard based on the information from interviews, policies and investigations reviewed.</p>

115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Upon the completion of an offender sexual abuse investigation, the department's PREA unit shall make written notification to the alleged victim regarding the outcome of the investigation utilizing the applicable PREA alleged sexual abuse by offender notification form or the PREA alleged sexual abuse by staff member notification form."

Warden Interview - The Warden said a written notice of investigation outcome is provided to inmates for sexual abuse investigations for all outcomes.

PREA Unit Investigator Interview - the PREA Unit Investigator said she provides the written notification to the facility PREA Site Coordinator (PCM). The PREA Site Coordinator provides the written notification to the inmate. There is a form for sexual abuse by an offender and by staff.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All subsequent notifications shall be made when: Staff member on offender allegations: following the completion of the investigation, the offender shall be notified when the following WRDCCurs (unless the investigation is unfounded); The staff member perpetrator is no longer assigned to the housing unit; The staff member perpetrator is no longer employed by the department; The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution; A disposition of charges exists related to sexual abuse within the institution."

Investigation File Review - In the twenty investigation files reviewed, there were eight sexual abuse investigations involving staff. The inmate victims in six were provided a PREA Alleged Sexual Abuse by Staff Member Notification form. Two inmate victims were no longer at WRDCC. Three were substantiated, two unsubstantiated and one unfounded.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offender on offender allegations: following the completion of an investigation, the offender shall be notified when the following occurs: (1) The offender has been indicted on a charge related to sexual abuse within the institution. (2) A disposition of charges exists related to sexual abuse within the institution."

Investigation File Review - Four sexual abuse investigations involved inmate perpetrators. A PREA Alleged Sexual Abuse by Offender Notification form was provided to the inmate victim in all four investigations.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The PREA unit shall forward the written notification to the offender via the PREA site coordinator. The PREA site coordinator shall ensure that the written notification is provided to the offender in a confidential manner."

The facility meets the standard based on information from interviews, documents and policies reviewed.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures." The policy follows this provision.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Termination from the department shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse." The policy follows this provision. The facility reported on the PAQ four staff violated sexual abuse and sexual harassment policy and one staff termination during the audit review period. Three of the four resigned prior to termination.</p> <p>Investigation File Review - The facility reported forty-five sexual abuse and sexual harassment investigations were completed during the last 12 months. Twenty investigations were reviewed. Three investigations of staff sexual abuse were substantiated. One staff was terminated and two resigned immediately after the investigator interview. The two that resigned would have been terminated. None of the staff were reported to law enforcement as the investigations concluded there was no clear violation of criminal law, only actions that fit the definition of staff sexual misconduct by kissing or talking about sex.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All terminations for violations or the resignation of a staff member, who would have been terminated if not for their resignation, shall be reported to relevant licensing or accreditation bodies and law enforcement." The policy follows this provision.</p> <p>The facility meets this standard based on the information from policies and documents.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies and law enforcement." The policy reflects the provisions of the standard.</p>

	<p>Warden Interview – The Warden said if a contract staff or volunteer was the subject of an allegation of sexual abuse, they would be removed from the facility until the investigation is resolved. If the investigation is substantiated, there would be a permanent restriction from entry for that contract staff or volunteer. A substantiated sexual harassment would be reviewed on a case-by-case basis to determine if removal is appropriate.</p> <p>Document Review – There were no contract staff or volunteers found to be involved in an investigation of sexual abuse or sexual harassment from the investigation file review. The facility reported on the PAQ no contract staff or volunteers being reported to law enforcement or relevant licensing bodies during the review period.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders shall be subject to corrective actions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender-on-offender sexual abuse in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>Investigation File Review – According to information provided by the PREA Unit Manager, there were no substantiated inmate on inmate sexual abuse investigations during the review period. This auditor found no substantiated inmate on inmate investigations in the twenty investigations reviewed. There were no inmates disciplined during the review period.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender’s disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>Warden Interview – The Warden said the inmate disciplinary process requires sanctions to be based on the circumstances of the violation, discipline history and progressive. Mitigating factors such as mental health can be considered. Staff check with Mental Health staff prior to the hearing.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states</p>

	<p>"The corrective action process shall consider whether an offender's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, shall be imposed in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.</p> <p>Warden Interview – The Warden said when considering sanctions for inmate discipline, an inmate's cognitive disabilities and mental health can be used as mitigating factors in sanctioning for sexual abuse and sexual harassment conduct violations</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "If found guilty of sexual abuse, the PREA site coordinator or designee shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."</p> <p>Mental Health Staff Interview – Inmate perpetrators will be offered mental health counseling within 60 days of the investigation being substantiated. Counseling is not mandated as a condition of program participation.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact."</p> <p>f) Missouri DOC policy IS19-1.6 Offender Accountability Program states "a report of sexual misconduct, made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying." The policy reflects this provision of the standard.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department prohibits all sexual activity between offenders. Consensual sexual activity between offenders shall not be deemed sexual abuse and shall be addressed in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.</p> <p>The Offender Rulebook page 21 provides inmates with the prohibited behavior of sexual misconduct which is "engaging with another offender in any type of consensual sexual activity.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "If the screening indicates that an offender has experienced prior sexual victimization, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening."

Risk Screening Staff Interview - The staff that conducts risk screening said he offers mental health services to inmates that report being a prior victim of sexual abuse. If the inmate wants to see mental health staff for services, he will complete a referral form and email it to mental health staff.

Mental Health Staff Interview - Mental Health staff said she receives referrals for mental health services for inmates that report being prior victims of sexual abuse.

Inmate Interviews - One inmate was interviewed that reported being a prior victim of sexual abuse at the risk assessment and was offered a referral to mental health. He declined the offer.

Document Review - Risk Assessments for twenty targeted inmates were requested for review. One risk assessment documented an offer of mental health services for a prior victim of sexual abuse.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "If the screening indicates that an offender has previously perpetrated sexual abuse, whether it occurred in a correctional setting or in the community, staff members shall ensure that the offender is offered a follow-up meeting with a mental health practitioner within 14 calendar days of the intake screening."

Document Review - Risk Assessments for twenty targeted inmates were requested for review. Two were documented as prior perpetrators of sexual abuse (sex offense convictions) with no offer mental health services documented on the risk screening per MODOC procedure.

d) Risk Screening Staff Interview - Staff that conduct the risk assessment said the information they gather from inmate interviews and the inmate record to complete the risk assessment is confidential and strictly limited to staff involved in the risk assessment process and review. The risk assessment is completed in an electronic system called MOSIS that staff must be granted access to.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting."

Medical Staff Interview - Medical staff said they cannot share information reported by an inmate about prior sexual abuse that occurred in the community with facility investigators without a signed informed consent from the inmate.

Mental Health Staff Interview - The Mental Health staff said inmates are informed of mental health staff duty to report in writing prior to a therapy meeting. If an inmate

	<p>provides information about an incident of sexual abuse at an institution to mental health staff, the staff must report it to the facility investigator. She said the inmate would have to sign a release for a report of sexual abuse that occurred in the community.</p> <p>CORRECTIVE ACTION REQUIRED: Two inmate risk assessments indicated they are prior perpetrators of sexual abuse and were not offered mental health services. A sample of risk assessments will be reviewed for inmates arriving during the corrective action period to review for compliance with the standard.</p> <p>Corrective Action Completed: Twenty risk assessments were reviewed and were completed during September. Nine assessments were completed for inmates with prior convictions for sex offenses making them prior perpetrators of sexual abuse. All Nine assessments documented nine inmates were offered mental health services with two accepting the services and seven declined the services. This demonstrates correct practice that meets the standard.</p> <p>The facility meets the provisions of this standard based on the information from the corrective actions, interviews, policies and documents reviewed.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims of sexual abuse shall receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional judgment."</p> <p>Medical Staff Interview – Medical staff said inmates that are victims of sexual abuse would be assessed and treated for emergent injuries and instructed not to destroy evidence until a forensic examination can be conducted. The forensic exam can be conducted by the SANE staff from WRDCC or another MODOC facility. SANE trained medical staff are on call. If no MODOC SANE's are available, the inmate can be taken to a local hospital with a forensic exam department.</p> <p>Investigation File Review – documentation from three cases indicated two inmate victims were provided mental health follow up services after reporting sexual abuse. One was provided a forensic examination by a SANE WRDCC nurse.</p> <p>The facility said there were no inmates that reported sexual abuse at WRDCC still at the facility during the onsite audit for interview.</p> <p>b) Staff Interviews – All staff said they would protect the victim until the shift</p>

	<p>supervisor could arrange for additional staff to take the victim to medical or they were instructed to take the victim to medical. The Shift Commander would notify medical about the sexual abuse report. If medical staff were temporarily unavailable, custody staff would wait with the victim until they could be seen by medical.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate."</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections by the MODOC SANE staff or by the hospital SANE.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each victim and abuser shall be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals shall be completed for continued care following their transfer to, or placement in, other facilities or their release from custody."</p> <p>Medical Staff Interview – Medical staff said inmate victims of sexual abuse would be provided follow up treatment on injuries and medication management for STI care.</p> <p>Mental Health Staff Interview – Mental health staff said victims of sexual abuse would be offered treatment services based on trauma informed care.</p> <p>Investigation File Review – documentation from two cases indicated two inmate victims were provided mental health follow up services after reporting sexual abuse.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims and abusers shall be provided with medical and mental health services consistent with the community level of care."</p>

	<p>Mental Health Staff Interview – Mental health staff said the victim would be provided mental health services similar to services offered in the community.</p> <p>Medical Staff Interview – The medical staff said the medical services provided are consistent to the services offered in the community.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections. If the inmate goes to a local hospital, the SANE there would conduct the testing and WRDCC medical staff would follow up on the medication.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse.”</p> <p>Mental Health Staff Interview – Mental health staff said therapies that focus on what pushes them to abusive behavior would be provided to the inmate perpetrators.</p> <p>The facility meets the provisions of this standard based on information from interviews and policies reviewed.</p>
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115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.</p> <p>Document Review – The facility provided twenty completed administrative</p>

investigations for review from the audit review period. There were no criminal investigations during the review period. Thirteen of the twenty were investigations of sexual abuse with three substantiated, four unsubstantiated and six unfounded. Incident reviews were documented on a PREA Sexual Abuse Incident Debriefing form for all substantiated and unsubstantiated investigations.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded." The policy reflects this provision of the standard.

Document Review – Seven completed PREA Sexual Abuse Incident Debriefing forms were provided with the investigation files for review. The PREA Sexual Abuse Incident Debriefing forms document the incident review. All seven sexual abuse incident reviews were completed ordinarily within 30 days of the investigation conclusion.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The review team for offender sexual abuse events shall include the PREA site coordinator, and other upper level administrators, when applicable, with input from the shift supervisor, investigators, and medical or mental health practitioners." The policy reflects this provision of the standard.

Warden Interview – The Warden said the incident debriefing team consisted of the Deputy Warden (PCM), Investigator, medical staff, mental health staff, and shift supervisor.

Document Review – The seven PREA Sexual Abuse Incident Debriefing forms documented the members of the review team. The Deputy Warden, Health Services Administrator, Mental Health Director, shift supervisor (captain or lieutenant) and Investigator participated in all reviews.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The PREA sexual abuse incident debriefing report shall be completed by the PREA site coordinator outlining in detail the findings of the incident debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse incident debriefing form." The form requires the review team to answer questions for the five factors in this standard.

Warden Interview – The Wardens said the debriefing team looks at the response of staff to the report; barriers or blind spots where the incident occurred; factors that may have contributed to the incident, such as sexual orientation or gender identity of the victim, the victim's charges, gang affiliation of an inmate subject, or race; staffing levels; and video camera deployment.

PREA Compliance Manager and Incident Review – An Assistant Warden is designated as the PREA Site Coordinator or PCM for WRDCC. He schedules the reviews as needed. The team can consist of the DW, medical staff, mental health staff,

	<p>Investigator, shift supervisor or first responder involved with the incident. He documents the review on the form and provides a copy to the Warden and PREA Unit Manager. All evidence is reviewed including written statements by the victim, witnesses, investigator interview notes, and watching video if available. If corrective actions are identified, they are documented on the form and coordinated with the Warden for completion or documented why it cannot be completed.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The facility shall implement the recommendations for improvement, or shall document its reasons why recommendations shall not be implemented." The policy reflects this provision of the standard.</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Annual Site Report: Each facility shall utilize information from the offender sexual abuse incident debriefings to prepare an annual report to be submitted to the department's PREA manager by the last working day in March." The policy provides the definitions for sexual abuse and sexual harassment in section II. The definitions are equal to the definitions in the PREA standards.</p> <p>Document Review – The 2023 ACC PREA Annual Report was reviewed. The report provided a summary of the 2023 PREA investigations and a comparison of the data between 2022 and 2023.</p> <p>WRDCC provided the facility annual PREA report for 2023. The report provided a summary of allegations in 2023 and comparison with incident rate from 2022, corrective actions taken from incident reviews, an evaluation of the video monitoring system.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Agency Report: The PREA manager shall prepare an annual report compiling each facility's current year's data and corrective actions."</p> <p>c) Missouri DOC Annual Report – The 2022 and 2021 MODOC PREA Annual Reports were reviewed. The reports provided a table of data broken down by incident type and outcomes. This data can be used to complete the Survey of Sexual Victimization summary report.</p> <p>Document Review – The Missouri DOC Survey of Sexual Victimization was completed</p>

	<p>for 2022.</p> <p>d) PREA Coordinator Interview – The PREA Coordinator said all information and data from incidents of sexual abuse and sexual harassment are retained in the Investigative Reporting Intelligence System.</p> <p>f) PREA Coordinator Interview – The PREA Coordinator said he uses the data and incident information for substantiated investigations from the Investigative Reporting Intelligence System to complete the Survey of Sexual Victimization when it is requested.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.88	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions. a. The report shall include: (1) a comparison with prior year’s data, (2) corrective actions, and (3) an assessment of the department’s progress in addressing offender sexual abuse.”</p> <p>2021 & 2022 PREA Annual Report – The PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>Agency Head – The Division Director said incident data is used to assess and improve housing assignments, video monitoring and staffing levels. Additional training is provided to staff through PREA Unit staff speaking at basic training courses.</p> <p>PREA Coordinator – The PREA Coordinator said the annual report compares data since 2013 and summarizes ongoing corrective actions.</p> <p>PREA Compliance Manager Interview – The PREA Site Coordinator/DW said the facility provides the facility data on its annual PREA report that the agency uses to complete the agency PREA report.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department’s annual PREA report shall be made available to the public on the department’s internet website.”</p> <p>Agency Head – The Division Director said the Director approves the report prior to posting it on the department’s website.</p>

	<p>Document Review – The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. Though the Agency Head Designee said the reports are reviewed and approved by the Director, the reports are not signed by the Director either electronically or by signature. It is recommended that the annual report be signed by the Director or designee each year.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The CAO or designee, PREA manager or department director shall edit specific material from the reports when publication would present clear and specific threat to the safety and security of a facility. The CAO or designee, PREA manager, or department director shall indicate the nature of the material edited.”</p> <p>PREA Coordinator – The PREA Coordinator said personally identifying or confidential information about incidents are not included in annual reports.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>PREA Coordinator – The PREA Coordinator said the PREA incident information is securely stored in the Investigative Reporting Intelligence System (IRIS). Access to IRIS is limited to investigators, PREA Site Coordinators, Warden’s and other staff directly involved in incident investigation and review.</p> <p>Missouri DOC Annual PREA Report - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The last two years of PREA Annual Reports were reviewed and found to have a comparison of sexual abuse data from 2013 to 2022. The reports did not contain any personal identifiers.</p> <p>The facility and agency meet this standard based on the information from the PREA Coordinator interview and review of annual reports found on the MODOC PREA webpage.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. Ozark Correctional Center was audited three years ago. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all their facilities during all audit cycles.</p> <p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with inmates in a private room with a window for observation by staff.</p> <p>A notice of audit was posted throughout the facility six weeks prior to the onsite audit notifying inmates they could send confidential correspondence to this auditor. No letters were received prior to the onsite audit from inmates.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	All of the final reports for PREA audits are posted on the Missouri DOC PREA webpage at https://doc.mo.gov/programs/PREA . Completed PREA audit re[ports for every facility have been posted on this page since 2014.

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b) Hiring and promotion decisions		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c) Hiring and promotion decisions		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d) Hiring and promotion decisions		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	no

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b) Policies to ensure referrals of allegations for investigations		
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c) Policies to ensure referrals of allegations for investigations		
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a) Employee training		
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	na
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	no
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	no

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	no
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)			
	<table><tr><td data-bbox="316 174 1289 568"><p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p></td><td data-bbox="1289 174 1490 568">yes</td></tr></table>	<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>	yes
<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>	yes		

PREA Facility Audit Report: Final

Name of Facility: Fulton Community Supervision Center

Facility Type: Community Confinement

Date Interim Report Submitted: 05/24/2024

Date Final Report Submitted: 10/30/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 10/30/2024

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	03/21/2024
End Date of On-Site Audit:	03/22/2024

FACILITY INFORMATION	
Facility name:	Fulton Community Supervision Center
Facility physical address:	1397 State Road O, Fulton, Missouri - 65251
Facility mailing address:	

Primary Contact

Name:	
Email Address:	
Telephone Number:	

Facility Director	
Name:	Shannon Kimsey
Email Address:	Shannon.Kimsey@doc.mo.gov
Telephone Number:	5735448823

Facility PREA Compliance Manager	
Name:	Shannon Kimsey
Email Address:	Shannon.Kimsey@doc.mo.gov
Telephone Number:	

Facility Characteristics	
Designed facility capacity:	42
Current population of facility:	36
Average daily population for the past 12 months:	28
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Females
Age range of population:	18 +
Facility security levels/resident custody levels:	Low
Number of staff currently employed at the facility who may have contact with	48

residents:	
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	1
Number of volunteers who have contact with residents, currently authorized to enter the facility:	9

AGENCY INFORMATION	
Name of agency:	Missouri Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2729 Plaza Drive, Jefferson City, Missouri - 65109
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102
Telephone number:	5737512389

Agency Chief Executive Officer Information:	
Name:	Trevor Foley
Email Address:	Trevor.Foley@doc.mo.gov
Telephone Number:	573-526-6607

Agency-Wide PREA Coordinator Information			
Name:	Darren Snellen	Email Address:	darren.snellen@doc.mo.gov

Facility AUDIT FINDINGS
Summary of Audit Findings
The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

41

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-03-21
2. End date of the onsite portion of the audit:	2024-03-22

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	<p>Fulton YWCA was contacted to verify their relationship with the facility in providing victim advocate services through an agreement.</p> <p>Just Detention International was contacted to inquire if any was correspondence received from a resident in the last 12 months. They replied by saying they did not receive correspondence from a resident at FCSC.</p>

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	42
15. Average daily population for the past 12 months:	28
16. Number of inmate/resident/detainee housing units:	2

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	34
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	2
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0

42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	1
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	1
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	5
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	The facility does not have a segregation unit.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit

49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	49
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	11
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS**Inmate/Resident/Detainee Interviews****Random Inmate/Resident/Detainee Interviews**

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	10
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54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	<p>Based on the population at the onsite audit being 32, five residents needed to be selected at random for interview. To ensure randomness, this auditor chose every 6th resident on the resident list beginning with the first on the list. Choosing based on demographic diversity would remove random selection, therefore it was not used.</p>
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	<p>No text provided.</p>
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	<p>5</p>

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The staff reviewed the risk assessments for all residents and did not find residents that fit this category.
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2

62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The staff reviewed the risk assessments for all residents and did not find residents that fit this category.
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The staff reviewed the risk assessments for all residents and did not find residents that fit this category.

64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The staff reviewed the risk assessments for all residents and did not find residents that fit this category.
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	<p>The staff reviewed the risk assessments for all residents and did not find residents that fit this category.</p>
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	<p>1</p>
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	<p>5</p>
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	<p>0</p>
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The staff reviewed the risk assessments for all residents and did not find residents that fit this category.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	Due to the low population size, there was a low probability of having residents that fit all of the targeted categories.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<div> <input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </div>
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<div> <input checked="" type="radio"/> Yes <input type="radio"/> No </div>
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	All of the security staff were interviewed on each shift that were scheduled to work during the onsite audit. Non-security staff had to be interviewed to reach twelve staff interviews.

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):

7

76. Were you able to interview the Agency Head?

☒ Yes

☐ No

77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?

☒ Yes

☐ No

78. Were you able to interview the PREA Coordinator?

☒ Yes

☐ No

79. Were you able to interview the PREA Compliance Manager?

☒ Yes

☐ No

☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☐ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☐ Medical staff
- ☐ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☐ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☐ First responders, both security and non-security staff
- ☒ Intake staff

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	victim advocate qualified staff
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
83. Provide any additional comments regarding selecting or interviewing specialized staff.	A few staff were interviewed for multiple specialized staff interviews resulting in small number of staff being interviewed overall.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?

☒ Yes

☐ No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes

☐ No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

☒ Yes

☐ No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

88. Informal conversations with staff during the site review (encouraged, not required)?

☐ Yes

☒ No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="checked" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY	
Sexual Abuse and Sexual Harassment Allegations and Investigations Overview	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	1	0	1	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	1	0	0
Total	0	1	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

1

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	There were no reports of staff or inmate sexual harassment during the review period.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- ☒ The audited facility or its parent agency
- ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- ☐ A third-party auditing entity (e.g., accreditation body, consulting firm)
- ☐ Other

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment is the policy that provides the zero-tolerance policy, definitions of sexual abuse and sexual harassment, and the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>b) Based on the organization charts provided, the Missouri Department of Corrections has a PREA Coordinator in the Office of Professional Standards that reports to the Director of that division. The Director of OPS then reports to the MODOC Director.</p> <p>PREA Coordinator Interview – The PREA Coordinator said he has sufficient time and authority to fulfill the duties of the PREA Coordinator for the agency. He oversees the PREA Unit that consists of dedicated investigators and support staff that assist him in managing and monitoring PREA standards compliance and PREA investigation at all facilities in the agency. Each facility has a PREA Compliance Manager that reports to him for PREA Compliance matters.</p>

	<p>PREA Compliance Manager – The Unit Supervisor is designated as the PREA Site Coordinator (PCM) at Fulton CSC. At the time of the onsite audit, the Unit Supervisor position was vacant. The Parole District Supervisor was covering as the Unit Supervisor and PREA Site Coordinator until the position is filled.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.212	Contracting with other entities for the confinement of residents
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>It was reported on the PAQ that the Missouri Department of Corrections currently does not contract for the confinement of inmates with a private or other governmental agency. The PREA Coordinator stated in his interview the Missouri DOC is not contracting with anyone for confinement of inmates at this time. The Chief Administrative Officer said the Fulton Community Services Center does not contract for the confinement of inmates. The facility reported on the PAQ there were two contracts for confinement entered into or renewed. The Chief Administrative Officer said she uploaded two old contracts in the PAQ by mistake.</p>

115.213	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires each facility to “maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse.” “The staffing plan shall consider the facility’s physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.”</p> <p>Staffing Plan Document – The facility provided a one page document that was titled the Fulton CSC Staff Plan. The document contained a breakdown by shift of the number of PPA II and PPA staff allotted for the shift and what the minimum number is for the shift. There was no mention of the other staff at the facility such as administrative or program staff that may be involved in monitoring residents. The plan did not consider the layout of the facility, the security level of residence or the prevalence of PREA incidents.</p>

	<p>Facility Director – The Chief Administrative Officer/Unit Supervisor said she reviews vacancies on a regular basis with the Unit Supervisor/PREA Site Coordinator and HR. The facility has a minimum of two staff per shift with one being female. Overtime is used to cover staff shortages due to call-ins to maintain the two staff minimum. The facility has not fallen below the two security staff minimum in the last year. If there are any deviations from the staffing plan, they would be documented on the shift summary. The Unit Supervisor reviews the shift reports weekly for deviations.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall comply with the staffing plan on a regular basis, deviations from the staffing plan shall be documented and justification for deviations noted.”</p> <p>A memorandum was provided by the Chief Administrative Officer that states FCSC has not fallen below the minimum staffing pattern. Shortages would be covered by mandated overtime.</p> <p>Facility Director - The Chief Administrative Officer/Unit Supervisor said the facility has a minimum of two staff per shift with one being female. Overtime is used to cover staff shortages due to call-ins to maintain the two staff minimum. The facility has not fallen below the two security staff minimum in the last year. If there are any deviations from the staffing plan, they will be documented on the shift summary. The Unit Supervisor reviews the shift reports weekly for deviations.</p> <p>c) The 2022 FCSC PREA Annual Report was provided as the review of the annual review of the staff plan. The report does discuss an evaluation of the camera and monitoring systems and a section for staffing plan evaluation. The staffing plan evaluation section does state that staffing patterns were adequate. The review does not address prevailing staffing patterns or the resources available to ensure adequate staffing levels.</p> <p>CORRECTIVE ACTION REQUIRED: The facility must provide documentation of a complete staffing plan and review the plan based on the requirements of the standard.</p> <p>Corrective Action Completed: The review of the staffing plan was completed and documented in a Facility Staffing Plan Review document that was completed by the District Administrator, also acting PREA Site Coordinator (PCM), and sent to the Northeast Regional Administrator and PREA Unit Manager (PREA Coordinator) for MODOC for review. The review covered thirteen factors that are required in substandard (a) and (c). The review was signed by the District Administrator. The facility meets the provisions of this standard based on the policies, documents, interviews and corrections completed.</p> <p>Based on the interviews, documents and policies reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Missouri Department of Corrections policy IS20-1.3 Searches prohibits cross gender strip searches except in exigent circumstances. Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment also prohibits cross-gender strip searches except in exigent circumstances. The facility reported on the PAQ that no cross-gender strip searches occurred in the past 12 months. The policies reflect the requirements of the provision for this standard.</p> <p>Document Review -The Unit Supervisor provided a memorandum on the PAQ that says FCSC has not had a cross-gender strip or cross-gender searches during the review period. Zero cross-gender strip or body cavity searches were reported on the PAQ. Zero pat-down searches of female residents conducted by male staff was reported on the PAQ.</p> <p>Random Staff Interviews – All female staff said that male staff do not conduct pat-down searches of the female residents. All male staff said they have not conducted a search of a female resident.</p> <p>Resident Interviews – All residents said they have not been searched by male staff during the time they have been at FCSC.</p> <p>c) Missouri DOC policy IS20-1.3 Searches requires staff to document all cross-gender strip searches on the cross-gender search form. There were no cross-gender strip search forms presented for review. The policy reflects the requirements for this provision of the standard.</p> <p>Document Review -The Unit Supervisor provided a memorandum on the PAQ that says FCSC has not had a cross-gender strip or cross-gender searches during the review period.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders shall be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with, institutional services, and probation and parole procedures regarding searches.” The policy also requires staff of the opposite gender to announce their presence prior to entering a housing unit. These announcements are to be logged in the housing unit chronological log. The policy reflects the requirements for this provision of the standard.</p> <p>Tour Observations – FCSC has one housing unit with a separate shower room and a room with toilets and sinks. All toilets were covered with stall walls with doors. There was an initial set of saloon doors going into the shower area and another that led into the room with stall showers that all had shower curtains that were hung off the floor enough to see feet. Opposite gender staff announcements were observed during the tour. Opposite gender staff announcements were documented in the</p>
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housing unit log as "PREA Announcements." A Sign indicating male staff are on the unit are hung up for hearing impaired inmates.

Random Staff Interviews – Twelve staff were selected at random from shift rosters for interviews. All staff said they felt like the residents could shower and use toilet facilities with enough privacy that male staff could not see their genitals or buttocks. All staff were aware of and hear opposite gender staff make announcements when entering housing units. Male staff said they make an announcement prior to entering the housing areas and bathrooms.

Document Review – Housing unit logs were requested for random dates in every month from February 2023 to January 2024. PREA announcements were found logged multiple times on each shift when male staff entered the housing unit. Shifts with all female staff working documented security rounds with no announcements documented.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall not perform strip or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, diagnostic center reception and orientation, and receiving screening intake center." Missouri DOC policy IS20-1.3 Searches prohibits staff from performing a strip search for the sole purpose of determining an inmate's gender. The policies reflect the requirements of the provision of this standard. There were no transgender residents at FCSC at the time of the onsite audit.

Random Staff Interviews – All staff said strip searching a transgender resident solely for determining their genital status was prohibited by policy, not allowed and would be unprofessional.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Custody staff members shall be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs." The policy reflects the requirements for this provision of the standard.

Random Staff Interviews – The staff said they had been trained how to do cross gender searches and searches of transgender inmates in the search training provided at the academy. The male staff said they have not searched a female resident. One female staff is always on the shift for searches. Female staff said they have not seen a male staff search a female resident.

Resident Interviews – None of the female residents said they have been searched by male staff. None said they had been subjected to a cross gender strip search.

Document Review – Documentation of search training was provided for seven security staff.

The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.

115.216	Residents with disabilities and residents who are limited English proficient
	<p data-bbox="279 232 981 264">Auditor Overall Determination: Meets Standard</p> <p data-bbox="279 311 564 342">Auditor Discussion</p> <p data-bbox="279 387 1481 880">a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires staff to “provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” LEP residents will be provided the PREA video transcript and PREA brochure in their native language. If these cannot be translated into their native language, the PREA site coordinator will utilize an interpreter to assist the resident in understanding the material. “Offender interpreters shall not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.”</p> <p data-bbox="279 960 1469 1285">The facility provided a large print version of the MDOC Offender Sexual Abuse and Harassment (PREA) Brochure for visually impaired residents, the printed transcript of the PREA video for hearing impaired residents, and a braille version of the PREA brochure. The PREA posters and were observed on the tour in both English and Spanish. The posters were placed in a location that could be easily read. The PREA brochure was also provided in seven different languages. The Chief Administrative Officer also provided a memorandum stating resident interpreters have not been used during the review period.</p> <p data-bbox="279 1366 1414 1482">Staff Interviews – Staff said they were aware of an interpretive service that a supervisor can access if needed for an LEP resident. All staff said using another resident to translate is prohibited.</p> <p data-bbox="279 1563 1481 1637">There were no limited English proficient or disabled residents to interview during the onsite audit.</p> <p data-bbox="279 1718 1481 1836">Agency Head – The Assistant Director said the MODOC makes every effort to provide accommodations for inmates and residents that have disabilities or are limited English proficient.</p> <p data-bbox="279 1917 1481 2076">Document Review – The Chief Administrative Officer provided a Missouri statewide contract for on-demand interpretive services. The contract provides access to three companies that can provide over-the-phone interpretive services for LEP people. The contract expires November 2024.</p>

	The facility meets the standard based on information from interviews, policies and documents reviewed.
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115.217	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not hire or promote any person, staff member, or enlist the services of any contractor that may have contact with an offender when it is known that he:</p> <p>a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or c. has been civilly or administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse.”</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background screening, candidate selection, maintenance of employee records, employee discipline, and labor organizations.”</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before hiring new staff members a worksite personnel staff member or designee shall: a. perform a criminal background records check; and b. attempt to contact all prior institutional employers, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background screening.”</p> <p>HR Staff Interview - HR staff said criminal background checks and pre-employment background checks are completed for all new hires and promotions. She reviews prior discipline issues that would include sexual harassment. Issues with sexual harassment history would be considered in hiring and promotion decisions. If applicants have prior corrections experience, a designated staff calls the prior employer for a pre-employment PREA check to inquire about substantiated sexual abuse investigations or resignations during a sexual abuse investigation.</p> <p>Document Review – Records were reviewed for sixteen staff interviewed. Three were either hired or transferred from another MODOC facility in the last 12 months. The dates of hire at FCSC were requested but not received. Two criminal</p>

background checks were provided for review for the three staff that said they started at FCSC less than a year ago. The PREA employment background checks were provided for review for two of the three.

d) Missouri DOC policy D2-2.2 Background Investigations states "Contract staff members, volunteers, and student interns shall have a background investigation conducted that consists of the criminal history check and any violations that have been reported to pertinent professional licensing and/or certification organizations if applicable."

Human Resource Staff Interview - HR staff said criminal background checks are conducted for all contract staff prior to working at the facility. The completed criminal background checks are retained in the HR office.

Document Review - Documentation of a completed criminal background check was requested for one contract staff at FCSC. The criminal background check was not provided. The facility must provide the criminal background check to meet the standard.

e) Missouri DOC policy D2-11.14 Annual Employment Requirements Section III. A requires an annual criminal background check to be completed on the birth month of every employee.

Human Resource Staff Interview - HR staff said she requests a criminal background check be completed on staff annually during their birth month. A criminal background check for contract staff is also completed annually during the birth month.

Document Review - Four criminal background checks provided on thirteen veteran staff were more than five years old. Three of the criminal background checks were not provided. A new criminal background check will need to be provided for the six staff to meet the standard.

f) Human Resource Staff Interview - HR staff said new hire staff and staff applying for promotions are asked questions about (a) 1-3 of this standard on applications for employment. Staff are not required to complete a self-evaluation annually and are not asked these questions again. Contract staff are asked the required questions on an Application for Facility Access form or a PREA-Contracted Staff form.

Document Review - Documentation of questions pertaining to (a) 1-3 were not provided for the staff hired at FCSC in the last year.

g) Missouri DOC policy D2-2.2 Background Investigations states "False information regarding substantiated allegations of offender or resident abuse and/or harassment on the employment application shall be grounds for termination."

h) Human Resource Staff Interview - HR staff said if another correctional institution contacts the Missouri DOC to inquire about substantiated allegations of sexual abuse or resignations during investigations of a former employee, they will provide information on the substantiated sexual abuse or resignations.

	<p>The PREA Coordinator for MODOC provided four examples of PREA information being release upon request to other corrections agencies during the last 12 months.</p> <p>CORRECTIVE ACTION REQUIRED: Requested criminal background checks and documentation of questions for (a) 1-3 must be provided for review and determined to meet the standard.</p> <p>Corrective Action Completed: New criminal background checks were completed for the three veteran staff and provided for review. A new criminal background check was completed for one contract staff and provided for review. The applications with questions answered pertaining to provision (a) 1-3 were provided for two staff. All documents reviewed meet the standards requirements.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets all of the provisions of the standard.</p>
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115.218	Upgrades to facilities and technology
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) The facility reported on the Pre-Audit Questionnaire and provided a memorandum that states there have been no substantial structural upgrades or changes since the last audit.</p> <p>Agency Head Interview – The Director said the agency designs expansion and modifications to maximize the agency’s ability to protect inmates.</p> <p>Director Interview – The Director said there have been no expansion or modifications since the last PREA audit. If there are any, improving inmate monitoring based on the requirements of the PREA standards would be considered in the design.</p> <p>b) A memorandum was provided through the Pre-Audit Questionnaire that states the video monitoring system was upgraded in July of 2023. Nine analog cameras were replaced with Nine IP cameras and three new cameras were added.</p> <p>Director Interview – The Director said the upgrade to the video monitoring system was completed with improving the facility’s ability to protect residents from sexual abuse.</p> <p>The facility meets this standard based on the information from interviews and documents reviewed.</p>

115.221	Evidence protocol and forensic medical examinations
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	<div data-bbox="280 118 983 152" data-label="Section-Header"><p>Auditor Overall Determination: Meets Standard</p></div> <div data-bbox="280 197 564 230" data-label="Section-Header"><p>Auditor Discussion</p></div> <div data-bbox="280 271 1469 600" data-label="Text"><p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” The policy also instructs staff to take steps to protect evidence. This may include instructing the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom. If possible, staff should not allow the inmate perpetrator to destroy evidence by preventing showering, changing clothes, eating, drinking, or using the bathroom.</p></div> <div data-bbox="280 636 1477 878" data-label="Text"><p>Staff Interviews - If an resident reports a sexual assault, all staff said they would ask the resident victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom until the inmate gets a forensic exam or they are relieved. Staff would ensure the alleged resident perpetrator would not destroy evidence in the same way. All said they would protect evidence at the scene until it could be collected by investigators.</p></div> <div data-bbox="280 913 1469 1032" data-label="Text"><p>b) MODOC policy D1-8.13 provides a time frame of 72 hours for possible collection of forensic evidence the same as found in the National Protocol for Sexual Assault Medical Forensic Examinations.</p></div> <div data-bbox="280 1068 1469 1357" data-label="Text"><p>c) MODOC policy D1-8.13 requires the facility health services staff to contact the on-call SANE staff member if the alleged incident occurred within 72 hours. The policy states “The SANE staff member shall collect evidence according to established forensic procedures for processing and document the exam and finding in the applicable department computer system.” “If the alleged perpetrator is a staff member, the victim shall be transported to the community emergency room for a sexual assault examination to be performed by a SANE or SAFE.”</p></div> <div data-bbox="280 1393 1477 1552" data-label="Text"><p>Director Interview – The Unit Supervisor/Regional Director said because FCSC does not have an area for a forensic examination to be performed by a MODOC SANE, the resident would be taken to Parkland Health Center if a forensic exam were needed. The exam would be no cost to a resident.</p></div> <div data-bbox="280 1588 1458 1834" data-label="Text"><p>Document Review – A copy of Missouri statute 191.0225 was provided for review. The statute requires all medical provider charges for forensic examinations to be billed to and paid by the Missouri Department of Health and Senior Services. No medical provider can charge a victim for the forensic exam. The facility provided a memorandum that states FCSC has not had to send a resident for a forensic exam during the review period.</p></div> <div data-bbox="280 1870 1469 2076" data-label="Text"><p>d-e, h) The facility provided a memorandum of understanding with the Coordinated Community Response Team of Callaway County. The Fulton Community Supervision Center is listed as a participating party in addition to the Coalition Against Rape and Domestic Violence. By being part of the MOU, FCSC resident victims of sexual abuse can receive victim advocate services from CARDV.</p></div>
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	<p>Victim Advocate Interview - FCSC also had staff trained to be a qualified victim advocate. The training certificate was provided by the facility. The training was provided by victim advocates from the Missouri Coalition Against Domestic Violence. The qualified staff victim advocate said she would offer victim advocate services to a resident victim of sexual abuse at the investigative interview or assist prior victims of sexual abuse with emotional support and connecting them with other agencies that are part of the MOU that can provide services as well. If there was a resident that was a victim of sexual assault, a victim advocate would be arranged through the local hospital. If one is not available they could call her and she would go to the hospital.</p> <p>Resident Interview – A resident that reported sexual abuse said she was offered a victim advocate by the investigator prior to being interviewed. She said one of the staff provided victim services or counseling for her during the investigator interview and after.</p> <p>The facility meets the provisions of this standard based on the information above interviews, policies and documents reviewed.</p>
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115.222	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>Agency Head – The Assistant Director said allegations of are investigated utilizing the PREA Unit or Institutional Investigators. Institutional Investigators investigate allegations of Sexual Harassment and the PREA Unit investigates allegations of Sexual Abuse. These investigations include both administrative and criminal investigations. This includes anonymous and third party allegations.</p> <p>Facility Head Interview – The Regional Parole Supervisor/Unit Supervisor said all sexual abuse and sexual harassment allegations are forwarded immediately to the PREA Unit in central office for investigation. FCSC does not have an institutional investigator.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” This policy was found posted on the Prison Rape Elimination Act page of the Missouri DOC website at https://doc.mo.gov/programs/PREA. PolicyD1-8.4 Institutional Investigations covers requirements for investigations in general. The</p>

	<p>policy is identified as confidential, therefore it cannot be posted on the MODOC website.</p> <p>Investigator Interview – The PREA Unit Investigator said all sexual abuse and sexual harassment allegations received at FCSC are sent to the PREA unit in a Request For Investigation form that would be completed and sent by the Unit Supervisor.</p> <p>Document Review – One investigation of an allegation of sexual abuse was provided for the review period. The Unit Supervisor requested an investigation by completing and sending a Request For Investigation to the PREA Unit. A PREA Unit Investigator was assigned to conduct the investigation.</p> <p>The facility meets the provisions of the standard based on the information from interviews, policies and documents reviewed.</p>
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115.231	Employee training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All staff members shall receive initial PREA training during the department's basic training.”</p> <p>PREA Basic Training Curriculum – The PREA Basic training curriculum was provided for review. It covers the zero tolerance policy of MODOC; staff responsibilities in prevention, detection, reporting and response procedures; inmate’s rights to be free of sexual abuse, sexual harassment and retaliation; staff rights to be free from retaliation; dynamics of sexual abuse; reactions of victims; how to detect signs of sexual abuse; avoiding inappropriate relationships with inmates; and mandatory reporting laws. The curriculum did not cover professional communication with LGBTI inmates. However, The Professional Boundaries lesson plan was provided for review that provides staff information on how to communicate effectively and professionally with LGBTI inmates. This training is all provided at the Basic Academy in a pre-service training for new hires.</p> <p>Random Staff Interviews – Staff said the training covered zero tolerance policy; rights of residents and staff; dynamics of sexual abuse, signs and reactions of sexual abuse victims, how to avoid inappropriate relationships with residents, how to respond to a report of sexual abuse, how to protect evidence, and professional communication with LGBTI residents. They could describe the information provided for these topics. Staff did not know about mandatory reporting. All staff said they completed the Basic PREA Training when they were hired and the PREA Refresher Training every two years. In the years between refresher training, they receive monthly emails with information about PREA and their responsibilities in prevention, detection, and response.</p>

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the time of assignment."

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. Years in which an employee is not required to complete training, the facility site coordinator shall provide refresher information on current sexual abuse and sexual harassment policies."

The Chief Administrative Officer/PREA Site Coordinator provided a memorandum that states staff are provided with refresher information between trainings.

PREA Refresher #1-12 - After the PREA Basic is completed at academy, staff are required to complete a PREA Refresher training modules every two years. These modules were reviewed and found they did not cover the required topic in (a) 10 mandatory reporting for victims under 18 and vulnerable adults. Topics (a) 1-9 are covered in the refresher training.

Staff Interviews - staff said they complete a PREA Refresher training every 2 years and receive emails monthly between bi-annual training that provide information about PREA. All staff demonstrated knowledge of all required topics except mandatory reporting laws.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All completed PREA training requires a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed the training. This form must be routed through the facility training officer or regional training coordinator."

Document Review - Records of PREA training completion were requested for sixteen staff. Seven records were reviewed with two showing completion in the last two years. Five documented the training being completed more than two years ago. Records were not provided for eight staff.

CORRECTIVE ACTION REQUIRED: Information must be added to the bi-annual refresher training that covers mandatory reporting laws for victims under 18 or vulnerable adults. The revised curriculum will be provided for review and documentation that the change has been communicated to the staff.

Documentation of completed PREA training within the last two years must be provided for fourteen staff. If the training has not been completed within the last two years, the staff will need to complete the training and provide documentation of completion.

Corrective Action Completed: The training curriculum for the PREA Refresher training was updated with information pertaining to the mandatory reporting laws

	<p>that require the facility to contact the Missouri Department of Social Services-Children's Division for inmates under 18 that are a victim of sexual abuse or the Department of Health and Senior Services for inmate victims of sexual abuse that are vulnerable adults. The training curriculum update was sent via email to all FCSC staff and will be included in the revised curriculum for future training. PREA training records were provided for the fourteen staff that were either missing or completed more than two years ago.</p> <p>Based on the information from interviews, documents and policies reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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115.232	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All part-time employees, volunteers, and contract staff members shall receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training."</p> <p>Training Curriculum – The PREA training curriculum for volunteers and contractors was provided for review. The curriculum provides volunteer and contract staff with the MODOC zero-tolerance policy, rights of inmates, signs of sexual abuse, MODOC's response process, dynamics of sexual abuse, reactions of victims, and how to respond to a report of sexual abuse.</p> <p>c) Document Review – Documentation of PREA training completion was requested for two volunteers and one contract staff. The documentation has not been received.</p> <p>CORRECTIVE ACTION REQUIRED: Documentation of PREA training completion must be provided for two volunteers and one contract staff.</p> <p>Corrective Action Completed: The PREA training completion records were provided for two volunteers and one contract staff. The records of PREA training completion meet the provisions of this standard.</p> <p>Based on the information from interviews, documents and policies reviewed, this auditor finds the facility meets the provisions of the standard.</p>

115.233	Resident education
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Auditor Overall Determination: Meets Standard**Auditor Discussion**

Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” The policy requires the facility to have the PREA offender brochure in several recognized languages. If the brochure is not available in the inmate’s language then an interpretive service will be utilized to provide the information. The PREA offender brochure was provided in seven additional languages. The policy also requires the facility to make PREA reporting information available or visible to all inmates through posters, the offender rulebook, and the brochure. Policy requires the inmates to sign an acknowledgement receipt for viewing the video and receiving the PREA offender brochure.

Tour Observations – A PREA education was not observed during the onsite audit as there were no new residents received. The area the education is provided may be in the dayroom or in an office depending on the number of residents received. Staff described the process and how the information is provided to residents. Information regarding reporting sexual abuse and sexual harassment and victim services was posted in the resident living areas, on the wall by the telephones, in the resident dayroom and at the entrance to the facility. The information was in both English and Spanish and was placed where it could easily be read by residents.

Intake Staff Interview – The staff that provide the PREA education said she provides the PREA brochure on the first day, shows a PREA information video and briefly explains how residents can report. She goes over the information in depth 2 days later. She covers the zero tolerance policy for sexual abuse and sexual harassment, residents rights and how to report. She provides information about where to make external reports and victim advocate services. The PREA Education is provided to all new residents regardless of transferring from another MODOC community supervision facility. If a resident has cognitive disabilities or can’t read, she will read over the information with the resident individually to ensure they understand the information.

Resident Interviews – Ten residents were interviewed. All said they were provided the brochure and video on the first or second day. Staff covered the information again with them in a group or individually a few days later. Zero tolerance and resident rights were covered during the orientation. All residents said they see the PREA information posters in the facility.

Document Review – The Offender Sexual Abuse and Harassment Acknowledgement forms were provided for review for eleven residents. The comprehensive PREA education was provided within the first few days of arrival at the facility.

	The facility meets the provisions of this standard based on the information above from interviews, policies and documents reviewed.
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115.234	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators assigned to investigate offender sexual abuse allegations shall receive specialized PREA investigator training.” The policy reflects the provision’s requirement.</p> <p>Training Curriculum – The NIC PREA: Investigating Sexual Abuse in a Confinement Setting was reviewed by this auditor. The training covers the investigation standards, Miranda, Garrity, evidence collection, forensic examinations, interviewing techniques, understanding the victim, and evidence requirements for substantiating administrative cases or for making a prosecutorial referral. The curriculum covered the requirements of the standard.</p> <p>Investigator Interview – The PREA Unit Investigator said she completed the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting and the advanced NIC investigations course. She also has completed sexual abuse investigation training through VAWA as well. She said the PREA Unit investigates all sexual abuse and sexual harassment cases for FCSC.</p> <p>Document Review – The NIC PREA Investigations training certificates were provided for the twelve PREA Unit Investigators.</p> <p>The facility meets this standard based on the interviews, policy and documents reviewed.</p>

115.235	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Health services staff members shall receive specialized PREA medical and mental health training.”</p> <p>Training Curriculum – The Centurian PREA Overview training curriculum was provided for review. The curriculum is medical contractor’s specialized medical</p>

	<p>training that all medical and mental health staff complete. The curriculum comes from Relias training. The training curriculum provides information about what is sexual abuse and sexual harassment; how to detect and assess sexual abuse and sexual harassment; preserving physical evidence; how to respond and communicate with victims; how medical and mental health staff are to report any knowledge or suspicion of sexual abuse and sexual harassment. The training curriculum covers the requirements of this provision of the standard.</p> <p>CORRECTIVE ACTION REQUIRED: The facility was asked to provide documentation of completion for the specialized training and PREA training for the one contract substance abuse counselor at FCSC. The documentation has not been provided.</p> <p>Corrective Action Completed: A certificate of completion for the NIC Specialized Medical training was provided for the contract drug addiction counselor.</p> <p>The facility meets this standard based on the policy and documents reviewed.</p>
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115.241	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All offenders shall be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding offender housing assignments, transgender and intersex offenders and the probation and parole procedures regarding housing assignments, transgender and intersex clients, and contracted residential facilities." The policy requires an assessment for risk of victimization and abusiveness.</p> <p>Risk Screening Staff Interviews - The staff that completes the initial risk screening assessment said she meets with residents individually on the first day they arrive to complete the initial risk screening. She asks the residents questions about prior victimization, sexual orientation, gender identity, disabilities, prior perpetration of sexual abuse, and if the resident fears victimization. She uses the resident record to obtain additional information about criminal history, conduct history size, age, and documented disabilities. The assessment is completed within 72 hours of the resident arrival at FCSC. The staff that completes the re-assessment said she asks the same questions that are asked for the initial screening assessment. She asks about prior victimization, sexual orientation, gender identity, and if the resident feels vulnerable to sexual abuse. She reviews the resident record to complete a full assessment within 30 days.</p> <p>Resident Interviews - All of the residents could recall being asked questions about prior victimization; identifying as lesbian, bisexual, transgender, or intersex;</p>

disabilities, and feelings of vulnerability to sexual abuse. Most could recall being asked the questions a second time around a month after arriving. Some admitted they just couldn't remember being asked a second time.

b) Missouri DOC policy IS5-2.3 Offender Internal Classification states "CCMs will conduct a new internal classification within the first 72 hours at that facility and the offender will be housed in accordance with the new internal classification score."

The policy requires a new risk assessment to be completed within 72 hours of arrival at the facility.

Document Review - The Initial Risk Assessments for twelve residents were reviewed. All initial assessments were completed within 72 hours of arrival at FCSC.

c) Missouri DOC policy IS5-2.3 Offender Internal Classification states "Facilities shall assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities." The risk assessment was provided for review. The factors in the assessment were found to be objective.

d) Risk Screening Staff Interview - The staff that completes the initial risk screening assessment said she meets with residents individually on the first day they arrive to complete the initial risk screening. She asks the residents questions about prior victimization, sexual orientation, gender identity, disabilities, prior perpetration of sexual abuse, and if the resident fears victimization. She uses the resident record to obtain additional information about criminal history, conduct history size, age, and documented disabilities.

Document Review - A Risk of Victimization and Abusiveness Screening Tool was reviewed and found to assess risk of victimization for the following factors: disabilities; age; resident physical stature; prior incarceration; prior conviction for sex offense with a Child or Adult victim; nonviolent history; homosexual or bisexual, gender non-conforming that provided the example of transgender or intersex identity; prior victim of sexual abuse; and perception of vulnerability to being sexually assaulted. Inmates are not detained solely for civil immigration in the MODOC. The screening tool does not clearly assess for the resident identifying as or perceived to be transgender or intersex. Using the word homosexual is not clearly instructing staff to assess for is or perceived to be gay or lesbian. The screening tool does not meet this provision of the standard.

e) Risk Screening Staff Interview - The staff that complete the initial assessment said she reviews the record for sex offense convictions, violent offense convictions, and prior conduct for violence or sexual abuse.

Document Review - The Risk of Victimization and Abusiveness Screening Tool was reviewed and found to assess risk of abusiveness for the following factors:

Committed sexual assault, molestation or rape at any time in their life and history of violence on others. The former assesses for prior acts of sexual abuse and the latter assesses for prior convictions for violent offenses. It is not clear if these two factors are assessing for prior institutional violence or sexual abuse. This does not meet this provision of the standard.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be reassessed within 30 days of arrival. The reassessment shall consider additional relevant information received by the facility after the initial intake screening."

Risk Screening Staff Interview - The staff that completes the re-assessment said she asks the same questions that are asked for the initial screening assessment. She asks about prior victimization, sexual orientation, gender identity, and if the resident feels vulnerable to sexual abuse. She reviews the resident record to complete a full assessment within 30 days.

Document Review - Eleven risk screening re-assessments were reviewed. All eleven were completed within 30 days of arrival at FCSC.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender's risk level shall be reassessed when warranted due to a referral, incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness."

Risk Screening Staff Interview - The staff that complete risk screenings said if there was an incident of sexual abuse at FCSC or other information was received that changed the assessment, she would complete another reassessment.

h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender shall not be disciplined for refusing to answer or not disclosing complete information during the assessment."

Risk Screening Staff Interview - The staff said inmates do not have to answer the questions during the risk assessment interview. If they refuse, they cannot be disciplined.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The chief administrative officer (CAO) or PREA site coordinator shall control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders."

PREA Coordinator Interview - The PREA Coordinator said information obtained for the risk assessment is confidential and access to the electronic system the assessments are completed in is controlled and limited to the staff that need to complete assessments and the staff involved in reviewing them.

Risk Screening Staff interview - The staff said information gathered to complete the risk assessment is confidential and limited to the staff that conduct the risk screenings. Access to the electronic system (MOSIS) is limited to staff that

	<p>complete the assessments or other staff directly involved reviewing assessments.</p> <p>CORRECTIVE ACTION REQUIRED: The Risk of Victimization and Abusiveness Screening Tool must be modified to meet provision (d) and (e). Once the modification is approved, completed assessments must be provided for review of use within required time frames in the standard.</p> <p>Corrective Action Completed: A revised set of risk screening tool completion instructions and the revised risk screening tool was sent to the facility by the PREA Coordinator. The revised risk screening tool Risk of Victimization Factor #7 was changed to Resident is, or is perceived to be gay, lesbian or bisexual, Factor #8 was changed to Resident is or is perceived to be transgender, intersex or gender non-conforming. A Risk of Abusiveness Factor #13 was added Resident has a history of prior institutional violence or sexual abuse, as known to the agency. The changes meet the requirements of the standard. The facility began using the revised risk screening tool August 2, 2024. Intake assessments and reassessments were provided for review that were completed in August, September and October. A total of twenty-one intake assessments and twenty-five reassessments were reviewed. All intake assessments were completed within 72 hours of the resident date of arrival. All reassessments were completed within 30 days of the resident date of arrival.</p> <p>Based on the information from corrective actions, interviews, policies and documents reviewed, this auditor finds the facility meets the standard.</p>
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115.242	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This shall be in accordance with the institutional services procedures regarding offender housing assignments, transgender and intersex offenders, offender recreation and activities, and probation and parole procedures regarding community supervision centers, the community release center, and contracted residential facilities."</p> <p>FCSC Standard Operating Procedure: Housing Assignment requires residents to be placed in cubicles based on the Risk of Victimization/Abusiveness Status. This is the results of the risk screening assessment. Residents that have a result for risk of victimization are placed in the center cubicles for better observation by staff through the living area entrance.</p>

Risk Screening Staff – Staff said the risk screening assessment results are used to place residents in the living area. Sigmas and Alphas cannot be in the same cubicle. Sigmas are placed in the center of the living area so staff can observe the better from the control room and hall through the living area entry.

Facility Director – The District Administrator/Unit Supervisor said residents that are Sigma are placed in the center of the living area for better observation. Sigma and Alpha are never placed in the same cubicle. If there was a resident that is deemed high risk for victimization, the resident can be placed in the extra living are that only houses two residents and had its own bathroom.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive.”

Risk Screening Staff said the placement of residents in the living area is based on an individual review of the risk screening results.

c) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee is responsible for determining a permanent housing assignment for each transgender or intersex offender, and prior to this assignment shall meet with each offender to determine his vulnerability within the general population and length of time living as the acquired gender. Transgender and intersex housing assignments shall not be made based solely on genitalia but must consider the offender’s health and safety and the security of the facility through a review of the respective classification, medical and mental health records.”

Missouri DOC policy IS5-3.3 Transgender and Intersex Offenders provides the process for review of an offender that has identified as transgender or intersex at the risk assessment. The staff that conduct the risk assessment notify the PREA Site Coordinator of the transgender or intersex identification. The Transgender Committee is consists of the PREA Site Coordinator, medical administrator, mental health chief, medical director. The Transgender Committee has an initial meeting with the offender. The offender then meets with Mental Health to be reviewed for gender affirming items, hormone therapy treatment consideration, and discuss health and safety concerns. The Transgender Committee completes the Transgender Committee Review form and forwards it to the Transgender Review Team in central administration. The Transgender Review Team consists of the PREA Coordinator, Deputy Division Director, Director of Rehabilitative Services.

The MODOC Division of Probation and Parole procedure P4-4.4 Transgender or Intersex Clients provides procedures for the Transgender Committee at a Community Supervision Center. The policy states the CSC Transgender Committee is comprised of the Chief Administrative Officer, Unit Supervisor, a Community Transition Officer II, and the clients Probation and Parole Officer. The committee considers the historical overview of the client’s transgender or intersex status that includes the status of transition, amount of time living as the identified gender, and

the client's views of safety. The committee decision is required to be made within 3 days of arrival. During that 3 days the resident will be placed in a bed assignment based on the risk screening results.

Facility Director - The Chief Administrative Officer said FCSC has not had a transgender resident in the last year. If a resident does identify as transgender at the risk screening or anytime after that, the resident would meet with the Transgender Committee prior to arrival to review facility housing placement, shower arrangements and gender affirming items. The facility documents recommendations on the Transgender Committee Review form and sends it to the PREA Coordinator for the Transgender Review Team in central administration to make a final decision.

PREA Coordinator - The PREA Coordinator said the facility Transgender Committee makes recommendations and sends the Transgender Review form to him to present to the Transgender Review Team in central administration. The Transgender Review Team members are the PREA Coordinator, Deputy Division Director, and Director of Rehabilitative Services. The review gives serious consideration to the transgender or intersex resident's views of vulnerability and safety. The review also considers history of the resident's status as transgender or intersex; institutional adjustment; risk assessment history; PREA investigation involvement; program assignments; medical history; special accommodations; and security concerns of the resident or staff. The Transgender Review Team makes a final decision within 10 days and sends a copy back to the facility.

d) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee shall meet with the offender within 10 working days of either the offender's arrival to the facility or upon learning the offender's transgender or intersex status and every 6 months thereafter."

The Chief Administrative Officer said there were no transgender residents in the last 12 months. The program is a 6 month program. Most transgender residents will be released at the time the next review is required, however if for some reason they are still there, the review would be completed.

e) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee review shall include the following: (1) Offender's view of his vulnerability."

Facility Director - The Chief Administrative Officer said if a transgender resident chose to shower separate from the other residents, a two person separate living area bathroom is separate from the main bathroom and would be offered as an alternative. The Transgender Committee would discuss shower arrangement options with the transgender resident.

f) Facility Director - The Chief Administrative Officer said lesbian, bisexual, transgender, and intersex residents are not placed in a dedicated housing unit.

Resident Interview - A lesbian resident said she did not think her bed assignment

	<p>was based on her sexual orientation.</p> <p>The facility meets the standard based on the information obtained from interviews and policies reviewed.</p>
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115.251	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request (IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline, and d. advocacy agency.” The methods of reporting are communicated to inmates in the PREA offender brochure and resident handbook provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC, report to any staff, or calling the PREA hotline toll free.</p> <p>Document Review – the resident handbook was provided for review. The PREA information is on the third page of the handbook and is the first information provided. The methods of reporting are tell any staff or write any staff; write to the Missouri Department of Public Safety, Crime Victim’s Unit; or call the PREA hotline. The PREA brochure contains the same reporting information as the resident handbook.</p> <p>Tour Observations – PREA reporting information posters were observed in resident living areas, dayrooms, facility entrance/visiting area, and by the resident phones.</p> <p>Random Staff Interviews – All staff said residents could report sexual abuse and sexual harassment either verbally or in writing to any staff and calling the PREA hotline.</p> <p>Resident Interviews – All residents said they could report sexual abuse or sexual harassment, retaliation or staff neglect of duty to report by calling the PREA hotline, telling any staff, writing to staff or writing anonymous to an outside organization. Some said their family could report by calling the hotline or the facility. Some knew recalled they could file a grievance to make a report.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail</p>

	<p>and not subject to examination.” The policy requires an external reporting method that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure.</p> <p>Facility Director - The Chief Administrative Officer said residents can write to the Department of Public Safety, Crime Victims Unit if they want to report outside of the MODOC. This correspondence is privileged and not subject to review by staff. Postage is covered and the resident can leave their name off of the envelope and correspondence if they want to remain anonymous.</p> <p>Resident Interviews - residents said they were told at intake and see posters that tell them they can write to an outside organization to report anonymously. Some recalled that it was the Crime Victims Unit.</p> <p>Tour Observation - PREA reporting posters were observed throughout the facility. The posters provided information about reporting to the Crime Victims Unit by writing and the resident can remain anonymous.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure.”</p> <p>Random Staff Interviews - Staff said they were required to receive reports from residents or third parties both verbally and in writing. All staff said they would have to immediately report the information to their supervisor or the Unit Supervisor. Staff are required to document the report in a interoffice communication to their supervisor and the Unit Supervisor.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct.” The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.</p> <p>Random Staff Interviews - All staff said they could make a private report by talking privately to their supervisor, the Unit Supervisor or by calling the PREA hotline or Clear Line. They could make the call when off work and could be anonymous.</p> <p>The facility meets the provisions of this standard based on the information above from tour observations, interviews, policies and documents reviewed.</p>
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Auditor Overall Determination: Meets Standard

Auditor Discussion

b) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not impose a time limit on when an offender may submit a complaint regarding an allegation of offender sexual abuse.” “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.” “Nothing in this section shall restrict the agency’s ability to defend against an offender lawsuit on the ground that the applicable statute of limitations has expired.” The policy allows for any complaints regarding sexual abuse to bypass the informal process and proceed immediately to grievance stage.

c) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.”

d) Missouri DOC policy D5-3.2 Offender Grievance states “Offender grievances alleging sexual abuse shall be processed as follows: If determined to be a non-emergency the CAO or designee shall respond within 30 calendar days of receipt. Non-emergency offender grievance appeals alleging offender sexual abuse shall be processed as follows: a response shall be provided as soon as practical, but no later than 60 calendar days of receipt. Computation of the 60 day time period shall not include the days between the offender’s receipt of the offender grievance response and receipt of the offender grievance appeal by the offender grievance unit at central office. Appeals shall be referred to the deputy division director or designee. An extension of time to respond, of up to 70 calendar days, may be claimed if the normal time period for response is insufficient to make an appropriate decision. The offender shall be notified in writing of such extension and shall be provided a date by which a response shall be provided. During the administrative process, including the offender grievance appeal level, if the offender does not receive a response within the time allotted for a reply, including extension, the offender may proceed to the next level of the offender grievance process.”

The facility reported on the PAQ there were no residents that reported sexual abuse through a grievance during the review period. One filed a grievance that reported sexual harassment that is pending investigation.

e) Missouri DOC policy D5-3.2 Offender Grievance states “Third Party Reporting: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, shall be permitted to assist offenders in filing requests for grievances or appeals relating to allegations of offender sexual abuse. This assistance cannot interfere with the safety and security of the institution. When a staff member receives the documentation from the reporting third party, it shall be attached to the grievance form and shall immediately be recorded in accordance with this procedure. A copy of the documentation shall also be

	<p>forwarded to the CAO or designee in order to be attached to the possible investigation or inquiry. The CCM shall attempt to discuss the issue with the offender (victim) prior to developing a response to confirm if the alleged victim agrees to have the request filed on his behalf. If the offender declines to have the request processed on his behalf, the CCM shall document the offender's decision and the complaint shall be considered withdrawn for grievance purposes."</p> <p>f) Missouri DOC policy D5-3.2 Offender Grievance states "If the CAO or the PREA site coordinator determines that the complaint meets the definition of a PREA emergency grievance, the grievance shall be addressed as follows: The CAO or designee shall prepare an initial response which shall be attached to the grievance and provided to the offender within 48 hours of receipt of the initial filing date. The offender shall sign and date the response. A final response from the CAO or designee shall be provided to the offender within 5 calendar days from the initial filing date. The offender shall sign and date the form. The initial and final response for the grievance shall document the department's determination whether the offender is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance."</p> <p>The facility reported on the Pre-Audit Questionnaire no emergency grievances reporting sexual abuse during the review period.</p> <p>g) The Chief Administrative Officer provided a memorandum that says there were no sexual abuse grievances that were filed in bad faith during the review period.</p> <p>The facility meets the provision of this standard based on the information from interviews, policies and documents reviewed.</p>
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115.253	Resident access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall offer alleged victims of offender sexual abuse, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, during the investigative process. When an allegation of sexual harassment is forwarded for investigation, the alleged victim of sexual harassment will be offered a victim advocate. Offenders shall be allowed to communicate with an advocate by mail or special visit in a confidential manner as possible to maintain safety and security of the institution."</p> <p>Qualified Staff Victim Advocate Interview - FCSC has a staff trained to be a qualified victim advocate. The training certificate was provided by the facility. The training was provided by victim advocates from the Missouri Coalition Against Domestic</p>

	<p>Violence. The qualified staff victim advocate said she would offer victim advocate services to a resident victim of sexual abuse at the investigative interview or assist prior victims of sexual abuse with emotional support and connecting them with other agencies that are part of the MOU that can provide services as well.</p> <p>Resident Interviews – Residents were asked if they were told there are services available for victims of sexual abuse and sexual harassment. They could recall staff telling them at orientation about victim services. They knew one of the staff was a victim advocate and that they could write to organizations they see on posters on the wall. One resident that reported sexual abuse was offered a victim advocate when she reported. She said she saw the staff victim advocate.</p> <p>Tour Observations – During the tour, signs that provided information about two victim advocate organizations were observed posted on the walls by the phones and in the living areas. The PREA brochure that is provided at intake informs residents a victim advocate will be provided if requested. A copy of the poster and PREA brochure was provided through the PAQ.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before being given access to a victim advocate, the offenders shall be informed of the extent to which communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory reporting laws.”</p> <p>Victim Advocate Posters – Victim Advocate posters were observed in living area and by the phones on the facility tour. The posters provided the contact information to Just Detention International and the Rape, Abuse and Incest National Network. This auditor contacted Just Detention International and was informed they had not received any correspondence during the review period. The posters inform inmates that telephone calls are monitored and that mail to these organizations is confidential and not subject to examination.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If a facility is unable to enter into a MOU with the advocacy center, the attempt shall be documented and advocacy services shall be provided by a qualified staff member.”</p> <p>FCSC is a member of a Coordinated Community Response Team with an MOU that provides victim advocate services for residents if they go to the local hospital for forensic medical services. The Coalition Against Rape and Domestic Violence is the advocacy organization.</p> <p>The facility meets the provisions of this standard based on the information from tour observations, interviews, policies and documents reviewed.</p>
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115.254	Third party reporting
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Tour Observations – Posters with information about reporting sexual abuse and sexual harassment were posted in the entrance/visiting area.</p> <p>MODOC PREA Webpage – The Missouri DOC PREA webpage provides information under the Friends and Family section for reporting sexual abuse and sexual harassment by calling, writing or emailing. This was observed at https://doc.mo.gov/programs/PREA.</p> <p>Resident Interviews – Most residents knew their family could report sexual abuse or sexual harassment for them if they contacted the facility or call the PREA hotline.</p>
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115.261	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Failure to report offender sexual abuse is a Class A misdemeanor in accordance with Missouri state statute. All staff members, shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure.”</p> <p>Random Staff Interviews – All Staff said they are required to report all information, knowledge, or suspicion of sexual abuse or sexual harassment, retaliation, or staff neglect to report. Staff said they are mandated reporters by state law. The information can be provided verbally initially and then in a written report as soon as possible.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions.”</p> <p>Random Staff Interviews – Staff said the information about an incident of sexual abuse or sexual harassment they receive from a resident is confidential and can only be shared with staff that are directly involved in the response. They cannot talk about an ongoing investigation with other staff.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health staff members shall inform offenders at the initiation of</p>

	<p>services of the practitioner's duty to report in accordance with statutes.”</p> <p>Fulton CSC does not have medical staff or mental health staff.</p> <p>d) A search of the internet found reports of sexual abuse of a vulnerable adult must go to Adult Protective Services at the Department of Health and Senior Services.</p> <p>Facility Director Interview – The Chief Administrative Officer said FSCS does not house residents under 18 years of age. If the resident fit the definition of a vulnerable adult under state law, a report of sexual abuse would be provided to the Adult Protective Services as required.</p> <p>e) Facility Director Interview - The Chief Administrative Officer said all allegations of sexual abuse and sexual harassment are referred to the investigators in the PREA Unit at central administration for the MODOC. FCSC does not have investigators.</p> <p>One completed investigation was provided for review. The resident called the PREA hotline and reported an incident of staff sexual misconduct. A Request for Investigation was sent by the CAO to request an investigation. A PREA Unit Investigator completed the investigation.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.262	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, shall immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist.” The facility reported zero incidents of imminent risk of sexual abuse in the past 12 months.</p> <p>Agency Head Interview – The Division Director said the facility would immediately remove an offender from a situation that is a substantial risk of imminent sexual abuse. The facility could move the offender to another work, program, housing assignment or place the offender in protective custody and transfer to another facility.</p> <p>Facility Director Interview - The Chief Administrative Officer said if a resident reports a substantial risk of imminent sexual abuse, the supervisor on the shift will immediately notify her. The supervisor at the facility will place the victim in the</p>

	<p>small separate living area to separate from the alleged perpetrator. The PREA Unit would be immediately contacted. The facility has not had an incident of risk of imminent sexual abuse in the last 12 months.</p> <p>Random Staff Interview – Staff said if a resident was at risk of imminent sexual abuse, they would immediately try to determine who the perpetrator is and separate from the victim. The victim could be placed in a separate small living area and staff would stay with her.</p> <p>The facility meets the standard based on the information from interviews and policies reviewed.</p>
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115.263	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving an allegation that an offender was sexually abused while confined at a facility outside of the department, the CAO or designee or the appropriate office shall ensure the outside facility is notified of the allegation within 72 hours. The CAO or designee shall maintain documentation of the allegation received and when the outside facility was notified with the allegation.”</p> <p>Facility Director Interview – The Chief Administrative Officer said if a resident reports to FCSC staff an incident of sexual abuse that occurred at another facility, the staff will document the information in a report and provide the report to the shift supervisor and her. She said she will call the other facility to provide an immediate notification and then send the information to the facility head via email within 72 hours. If the investigator for the other facility needs additional information from the resident, she will assist by making the resident available to the investigator or contacting a PREA Unit Investigator. She said the facility has not had a resident report sexual abuse that occurred at another facility during the last 12 months. This was reported on the PAQ.</p> <p>d) Facility Director Interview – The Chief Administrative Officer said if she is contacted by another facility head about a report of sexual abuse from a former FCSC resident, she will forward the report to the PREA Unit and request an investigation. She said FCSC has not received a report of sexual abuse that occurred at FCSC from another facility in the last 12 months.</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>

115.264	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “In the event of an allegation of a penetration act, the first responder shall take the following steps: (1) Ensure the safety of the victim. (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable. (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (4) The shift supervisor shall make telephone notifications and respond as outlined in the facility’s coordinated response to offender sexual abuse protocol.”</p> <p>Random Staff Interviews – Security Staff said if a resident reports being sexually assaulted within the last 72 hours they would instruct the victim to not change clothes, shower, brush teeth, eat drink, smoke or use the restroom in order to protect evidence from being destroyed. Non-security staff said they would instruct the victim not to change clothes, shower, brush teeth, eat drink, or use the restroom in order to protect evidence from being destroyed. They would then notify security staff, specifically the supervisor on the shift, and wait for security staff to come take custody of the inmate. All staff said they would separate the victim from other residents and keep her safe.</p> <p>One investigation of sexual abuse was provided for review. The incident did not involve first responders or DNA evidence.</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>

115.265	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The facility provided Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment as the coordinated response plan for FCSC. Though the policy has a section that provides guidance to facilities on the development of a coordinated response plan, an agency policy cannot be used as the facility plan.</p>

	<p>Warden Interview – The Warden said the facility has a plan that provides the actions to be taken in response to a report of sexual abuse. The plan provides the responsibilities for first responders, investigators, medical and mental health, and notification to him and the PREA Site Coordinator.</p> <p>CORRECTIVE ACTION REQUIRED: The facility must provide a coordinated plan for review that provides the actions taken in response to a report of sexual abuse by first responders, medical, mental health, investigators and facility leadership that is specific to FCSC.</p> <p>Corrective Action Completed: The facility provided the Coordinated Response to Offender Sexual Abuse for review. This is FCSC’s institutional plan to coordinate staff actions in response to an allegation of an incident of sexual abuse. The plan provides basic roles to staff first responders, the Shift Commander, PREA Site Coordinator, victim advocate staff, and the Chief Administrative Officer or designee. The plan specifies staff response to allegations of penetration and non-penetration incidents of sexual abuse that includes contacting local law enforcement.</p> <p>Based on information from interviews and documents reviewed, the facility meets the standard.</p>
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115.266	Preservation of ability to protect residents from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) MDOC policy D2-11.6 Labor Organization states “Per the Prison Rape Elimination Act, the department shall not enter into or renew any collective bargaining agreements or other agreements that limit the department’s ability to remove alleged staff sexual abusers from contact with any offender or resident pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.”</p> <p>Agency Head Interview – The designee for the MODOC Director said the Missouri DOC does have an active bargaining unit agreement, but it does not limit the agency’s ability to remove staff alleged to have committed sexual abuse away from inmates during the investigation the same as other staff.</p> <p>PREA Coordinator Interview – The PREA Coordinator said the Missouri DOC has a collective bargaining agreement for staff, but it does not prevent the removal of staff from contact with an offender that alleged sexual abuse by the staff. He said the agreement has expired and has not been renewed.</p> <p>Document Review – the expired agreement was provided for review. The agreement presented expired in October of 2013. The MODOC does not have a labor</p>

	<p>agreement that prevents the removal of staff during an investigation of sexual abuse or sexual harassment.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>
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115.267	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA site coordinator shall ensure victims, individuals who report sexual abuse, and those that cooperate with offender sexual abuse investigations are monitored and protected from retaliation.”</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires the PREA Site Coordinator to offer emotional support services to offender victims, witnesses, reporters, staff reporters and staff witnesses.</p> <p>Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.</p> <p>Facility Director – The Chief Administrative Officer said she is currently conducting retaliation monitoring while the Unit Supervisor position is vacant. If resident retaliation is suspected or reported, she would meet with the resident and separate them by moving the resident that is retaliating to the small living area that is separate from the main living area if the circumstances allow. progressive discipline may be used. If the retaliation is serious, the resident retaliating can be removed from the program/facility. If staff are retaliating, she would separate the staff from the resident area or put them on a temporary suspension depending on the circumstances and use progressive discipline.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The alleged victim of offender sexual abuse shall be monitored for a minimum of 90 days to assess any potential risk or act of retaliation. The assessment-retaliation status checklist form shall be used during each of the assessment interviews. If the victim expresses fear of retaliation, monitoring shall continue for an additional 90 day period or until the victim or reporter is no longer in fear of retaliation or if the investigation is unfounded.”</p> <p>Facility Director – The Chief Administrative Officer said she meets with the resident victim for the initial meeting soon after the report is made and then meets with them every 30 days for up to 90 days. To monitor for retaliation, she reviews conduct, changes in bed assignment or loss of privileges. She also monitors the</p>

provision of emotional support services. She said she also asks the resident if they think someone is retaliating against them. If there is retaliation, she will have it investigated immediately. If there is a need to continue monitoring, she can extend it for 90 days.

Resident Interview – a resident that reported sexual abuse said she was meeting with the CAO every 30 days. The first meeting was a few days after reporting. She said there have been 3 meetings at the time of the interview.

Document review – Three Assessment/Retaliation Status Checklist forms from the single investigation were provided for review. There was an initial, 30 day and 60 day review. each form documented the conversation

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Monitoring shall include face-to-face status checks.”

Facility Director – The Chief Administrative Officer said the meeting with the resident are face to face every 30 days for a total of four meetings.

Resident Interview – a resident that reported sexual abuse said the meetings were face to face meetings with the CAO.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Reporters and witnesses shall be monitored for retaliation at the minimum of one time utilizing the assessment-retaliation status checklist form. If no retaliation is reported, monitoring will cease.” This requirement of the policy should include inmate reporters. Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims.

Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.

Facility Director – The Chief Administrative Officer said if witnesses or other residents or staff that cooperate with an investigation express a fear of retaliation, she will conduct monitoring for them as well.

CORRECTIVE ACTION REQUIRED: Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims. Provide the policy change and documentation of the change in policy and practice being communicated to all PREA Site Coordinators.

Corrective Action Completed: The Agency has updated policy D1-8.13 Offender Sexual Abuse and Harassment to now include third-party inmate reporters in face-

	<p>to-face monitoring meetings for 90 days, aligning with the existing monitoring requirements for inmate victims. Staff who report sexual abuse will undergo 90 days of monitoring and receive a flyer detailing how to report any retaliation to the Warden, PREA Hotline, CLEAR line, PREA Email, or the Office of Professional Standards email. Offenders or staff who cooperate in a sexual abuse investigation as witnesses and express concerns about retaliation will be evaluated and protected from retaliation. This policy revision and its implementation were communicated to the PREA site Coordinators (PCM) by the PREA Unit Manager (PREA Coordinator) on August 23, 2024, via email.</p>
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115.271	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she is immediately contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Investigation File Review: One investigation of sexual abuse completed during the review period was provided for review. The incident involving staff was reported to another staff on the day of the incident. The Facility Director was notified the day of the incident. The staff was removed from the facility. A request for investigation was sent to the PREA Unit. The investigation was promptly started when the RFI was received. The investigation thoroughly documented video evidence, interviews, a background review, actions of staff, and the basis of the outcome.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators shall receive specialized PREA investigation training prior to conducting an investigation involving offender sexual abuse.” The PREA Unit Investigators conduct all of the sexual abuse investigations</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she has completed the NIC Sexual Abuse Investigations in a Confinement Setting, the NIC Advanced Sexual Abuse Investigations training and training by VAWA online.</p> <p>Document Review - NIC training certificates were provided for 12 investigators in the PREA Unit.</p> <p>c) PREA Unit Investigator Interview - The PREA Unit Investigator said she receives a</p>

Request For Investigation from the facility and the PREA Notification Checklist when there is a sexual abuse or sexual harassment allegation. The PREA Unit Investigators conduct the administrative and criminal investigations for sexual abuse and sexual harassment for FCSC. She reviews the initial information, reviews video evidence if available, conducts a background investigation of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident.

d) PREA Unit Investigator Interview – The PREA Unit Investigator said they do not conduct compelled interviews. If a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it certified mail to document the referral.

e) PREA Unit Investigator Interview – The PREA Unit Investigator said she is not allowed to subject the victim to a truth telling device. The subject of the investigation could be asked to complete a voice stress analysis. She determines the subject's credibility on a case-by-case basis from the background review of prior criminal history, PREA investigations and conduct history.

Resident Interview – the resident that reported sexual abuse did not report being subjected to a truth telling device as part of the investigation.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Administrative investigations shall include an effort to determine whether staff member actions or failure to act contributed to the abuse."

PREA Unit Investigator – The PREA Unit Investigator said she reviews staff actions in relation to the coordinated response plan, policies and procedures. This is documented in the administrative investigation report.

Investigation File Review – One investigation was reviewed. Staff actions that contributed to the incident were documented in the investigation report.

g) PREA Unit Investigator Interview – The investigator said she documents physical evidence collected, all interviews conducted, the review of video evidence and documentary evidence for criminal investigations.

The investigation reviewed was not a criminal investigation.

h) PREA Unit Investigator Interview – The investigator said if a possible criminal violation is identified, she will contact the local prosecuting attorney for guidance and to write the Probable Cause Statement. She will send it certified mail to document the referral.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Inquiries regarding offender sexual abuse and harassment and all supporting documents shall be retained as long as the alleged perpetrator is incarcerated or employed with the department, plus 5 years and in accordance with the department procedure regarding records retention."

	<p>j) PREA Unit Investigator Interview – The PREA Unit investigator said if the victim or the subject left the facility, she would do her best to contact staff via telephone with contact information from HR or contact the Parole Officer for the inmate to arrange a phone interview.</p> <p>Investigation File Review – In the only investigation during the review period, the staff subject of the investigation left the facility the day of the incident and did not return. The investigator made several attempts to call the subject. The investigation was completed despite not being able to contact the perpetrator.</p> <p>The facility meets the provisions of the standard based on the interviews, policies and documents reviewed.</p>
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115.272	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.”</p> <p>Investigator Interview – The PREA Unit Investigator said preponderance of evidence is the evidence standard used for all administrative investigations by the Missouri DOC investigators. She said there must be more than 50% of the evidence supporting the alleged incident occurred as reported to be substantiated.</p> <p>Document Review – One investigation was completed during the review period and provided for review with an outcome of unsubstantiated for sexual abuse. The evidence standard used for the investigation was preponderance of the evidence.</p> <p>The facility meets this standard based on the interview, policy and document reviewed.</p>

115.273	Reporting to residents
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon the completion of an offender sexual abuse investigation, the department’s PREA unit shall make written notification to the alleged victim regarding the</p>

outcome of the investigation utilizing the applicable PREA alleged sexual abuse by offender notification form or the PREA alleged sexual abuse by staff member notification form.”

Director Interview – The Regional Parole Supervisor/Unit Supervisor said when an investigation concludes, the PREA Unit Investigator will send a written notification of outcome to the facility PREA Site Coordinator. The PREA Site Coordinator will provide the notification to the resident.

Investigator Interview – The PREA Unit Investigator said she fills out the written notification for the outcome of the investigation and sends it to the PREA Site Coordinator at FCSC so it can be provided to the resident. There are two forms, one for incidents involving staff and one for incidents involving inmates or residents.

She completed a PREA Alleged Sexual Abuse by Staff Member Notification form for the one investigation completed at FCSC in the last 12 months and sent it to the facility PREA Site Coordinator to provide to the resident.

Document Review – A PREA Alleged Sexual Abuse by Staff Member Notification form was completed for the one sexual abuse investigation conducted at FCSC during the last year. The form was signed by the resident and the staff providing the notification of investigation outcome.

Resident Interview – A resident that reported an allegation of sexual abuse said she knew the outcome and that the staff no longer worked at the facility.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All subsequent notifications shall be made when: Staff member on offender allegations: following the completion of the investigation, the offender shall be notified when the following occurs (unless the investigation is unfounded); The staff member perpetrator is no longer assigned to the housing unit; The staff member perpetrator is no longer employed by the department; The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution; A disposition of charges exists related to sexual abuse within the institution.”

Resident Interview – A resident that reported an allegation of sexual abuse said she signed a notification form but didn’t recall getting a copy of it. She said she knew the outcome and that the staff no longer worked at the facility.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offender on offender allegations: following the completion of an investigation, the offender shall be notified when the following occurs: (1) The offender has been indicted on a charge related to sexual abuse within the institution. (2) A disposition of charges exists related to sexual abuse within the institution.” There were no completed investigations of sexual abuse committed by a resident on another resident during the review period. Two examples were uploaded to the PAQ that were not for residents at FCSC. They were for inmates at other male MODOC facilities.

	<p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA unit shall forward the written notification to the offender via the PREA site coordinator. The PREA site coordinator shall ensure that the written notification is provided to the offender in a confidential manner.”</p> <p>Document Review – A PREA Alleged Sexual Abuse by Staff Member Notification form was completed for the one sexual abuse investigation conducted at FCSC during the last year. The form was signed by the resident and the staff providing the notification of investigation outcome.</p> <p>The facility meets the provisions of this standard based on the interviews, documents and policies reviewed.</p>
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115.276	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures.” The policy follows this provision.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Termination from the department shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse.” The policy follows this provision.</p> <p>The facility reported on the PAQ one staff was terminated for violating the sexual abuse and sexual harassment policy. A review of investigation records shows the one sexual abuse investigation was unsubstantiated. The staff termination was a result of a substantiated finding for unprofessional conduct.</p> <p>c) The facility reported on the PAQ one staff discipline for violation of the sexual abuse and sexual harassment policy during the last 12 months</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All terminations for violations or the resignation of a staff member, who would have been terminated if not for their resignation, shall be reported to relevant licensing or accreditation bodies and law enforcement.” The policy follows this provision.</p> <p>The facility reported on the PAQ no staff reported to law enforcement or professional licensing boards. There was no substantiated sexual abuse allegations based on a review of the investigation files.</p> <p>The facility meets the provisions of this standard based on the documents and policies reviewed.</p>

115.277	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies and law enforcement.” The policy reflects the provisions of the standard. The COA provided a memorandum that states “The Fulton CSC has not had any corrective action incidents for our volunteers or contractor this audit period.” There were no investigations involving a volunteer or contract staff.</p> <p>Facility Director – The Chief Administrative Officer said if a volunteer or contract staff were to be involved in an incident of sexual abuse or sexual harassment, she would temporarily suspend them pending the investigation outcome. If the investigation is substantiated, she would terminate their involvement with the facility. If the volunteer or contract staff had a professional license, she would refer the information to the Missouri Division of Professional Registration.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>

115.278	Disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders shall be subject to corrective actions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender on offender sexual abuse in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard. The facility reported on the PAQ there were no resident on resident administrative of criminal findings of sexual abuse during the last 12 months.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender’s disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>Facility Director – The Chief Administrative Officer said if a resident is found to have</p>

committed sexual abuse or sexual harassment, she would be disciplined in accordance with the severity of the offense and prior history of discipline.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The corrective action process shall consider whether an offender's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, shall be imposed in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Facility Director - The Chief Administrative Officer said mitigating factors, such as cognitive disabilities, would be considered in determining sanctions. Sanctions could be loss of privileges or removal from the program.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "If found guilty of sexual abuse, the PREA site coordinator or designee shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."

Facility Director - The Chief Administrative Officer said a resident that is determined to have committed sexual abuse will be referred for mental health counseling by an outside agency.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact."

f) Missouri DOC policy IS19-1.6 Offender Accountability Program states "a report of sexual misconduct, made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying." The policy reflects this provision of the standard.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department prohibits all sexual activity between offenders. Consensual sexual activity between offenders shall not be deemed sexual abuse and shall be addressed in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Missouri DOC Probation and Parole policy P4-4.30 Documenting and Responding to Violations of Facility Rules states under section C Violations of Sexual Misconduct General Information "If prohibited consensual sexual activity is identified, then facility staff may sanction clients for such activity and shall not be considered a Prison Rape Elimination Act."

The facility meets the provisions of the standard based on the information from interviews and policies reviewed.

115.282	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional judgment.”</p> <p>The COA provided a memorandum that states “Local mental health issues are referred to the Arthur Center. Medical issues are referred to the hospital or local medical providers. We do not provide onsite services.” There was one investigation that occurred during the review period that did not require emergency medical services. The incident was determined to not be sexual abuse.</p> <p>b) Staff Interviews – Staff said if a resident reports sexual abuse to them, they would separate the victim from the perpetrator and contact the COA. The supervisor on shift would call the hospital and they would help take the resident to the hospital if they were told to. Two shift supervisors were interviewed. Both said they have protocols that involve contacting the hospital and arranging for the victim to be transported.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Facility Director – The Chief Administrative Officer said the emergency rooms would provide access to contraception STI treatment.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>

115.283	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each victim and abuser shall be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals shall be completed for continued care following their transfer to, or placement in, other facilities or their release from custody."

The COA provided a memorandum that states "Local mental health issues are referred to the Arthur Center. Medical issues are referred to the hospital or local medical providers. We do not provide onsite services."

Facility Director – The Chief Administrative Officer said outside medical and mental health facilities, such as Parkland Health, would provide treatment, follow up care and referrals upon release.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims and abusers shall be provided with medical and mental health services consistent with the community level of care."

Facility Director – The Chief Administrative Officer said all medical and mental health services are provided in the community at Parkland Health.

d-e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Female victims shall be offered timely information and timely access to pregnancy testing and emergency contraception in accordance with professionally accepted standards of care, where medically appropriate."

The COA provided a memorandum that states the FCSC has not had any incident of sexual abuse that involved vaginal penetration during the review period.

Facility Director – The Chief Administrative Officer said residents would be offered a pregnancy test and information about lawful pregnancy related medical services at Parkland Health.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate."

Facility Director – The Chief Administrative Officer said Parkland Health would offer STI testing and treatment when necessary.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."

The COA provided information regarding the Sexual Assault Forensic Exam program through the Missouri Department of Public Safety that covers the costs for forensic

	<p>exams for victims of sexual abuse.</p> <p>h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse.”</p> <p>The COA provided a memorandum that states “Local mental health issues are referred to the Arthur Center. Medical issues are referred to the hospital or local medical providers. We do not provide onsite services.”</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.286	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.</p> <p>Document Review – A PREA Sexual Abuse Debriefing form was provided for an investigation of sexual abuse that was unsubstantiated. The review team consisted of the COA, Unit Supervisors for Parole, shift supervisors, and staff that received the report.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.</p> <p>Document Review – The PREA Sexual Abuse Debriefing form was completed twenty days after the investigations concluded.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The review team for offender sexual abuse events shall include the PREA site coordinator, and other upper level administrators, when applicable, with input from the shift supervisor, investigators, and medical or mental health practitioners.” The</p>

	<p>policy reflects this provision of the standard.</p> <p>Document Review - The review team consisted of the COA (PREA Site Coordinator), Unit Supervisors for Parole and programs, shift supervisors, and staff first responders that received the report.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA sexual abuse incident debriefing report shall be completed by the PREA site coordinator outlining in detail the findings of the incident debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse incident debriefing form.” The form requires the review team to answer questions for the five factors in this standard.</p> <p>Document Review – The PREA Sexual Abuse Debriefing form documented the review. The review covered how the incident was reported, physical barriers, motivating factors (i.e. race, ethnicity, sexual orientation, gang affiliation), housing assignment based on risk assessment, staffing levels, medical response, mental health response, video monitoring, possible need for policy change, and problems identified.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The facility shall implement the recommendations for improvement or shall document its reasons why recommendations shall not be implemented.” The policy reflects this provision of the standard.</p> <p>Document Review – The PREA Sexual Abuse Debriefing form documented a problem identified in response to the report. The corrective actions were documented.</p> <p>Facility Director/PREA Coordinator/Incident Review Team – The Chief Administrative Officer said the incident review team consists of the PREA Site Coordinator (her), other Unit Supervisors, Investigator, shift supervisors and first responder. All evidence and the investigation report are reviewed. The staff response to the report, actions that may have contributed to the incident, staffing levels/monitoring, victim characteristics, perpetrator characteristics/history are all reviewed. Corrections are made if problems are identified that is facility specific. Corrections for agency level issues are recommended and sent to the PREA Unit.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.287	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states

	<p>“Annual Site Report: Each facility shall utilize information from the offender sexual abuse incident debriefings to prepare an annual report to be submitted to the department’s PREA manager by the last working day in March.” The policy provides the definitions for sexual abuse and sexual harassment in section II. The definitions are equal to the definitions in the PREA standards.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions.”</p> <p>c) Missouri DOC Annual Report – The 2022 and 2021 MODOC PREA Annual Reports were reviewed. The reports provided a table of data broken down by incident type and outcomes. This data can be used to complete the Survey of Sexual Victimization summary report.</p> <p>d) PREA Coordinator Interview – The PREA Coordinator said all information and data from incidents of sexual abuse and sexual harassment are retained in the Investigative Reporting Intelligence System.</p> <p>f) PREA Coordinator Interview – The PREA Coordinator said he uses the data and incident information for substantiated investigations from the Investigative Reporting Intelligence System to complete the Survey of Sexual Victimization when it is requested.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.288	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions. a. The report shall include: (1) a comparison with prior year's data, (2) corrective actions, and (3) an assessment of the department's progress in addressing offender sexual abuse.”</p> <p>2021 & 2022 PREA Annual Report – The PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>Agency Head – The Division Director said incident data is used to assess and improve housing assignments, video monitoring and staffing levels. Additional training is provided to staff through PREA Unit staff speaking at basic training courses.</p>

	<p>PREA Coordinator – The PREA Coordinator said the annual report compares data since 2013 and summarizes ongoing corrective actions.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department's annual PREA report shall be made available to the public on the department's internet website.”</p> <p>Agency Head – The Division Director said the Director approves the report prior to posting it on the department’s website.</p> <p>Document Review – The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. Though the Agency Head Designee said the reports are reviewed and approved by the Director, the reports are not signed by the Director either electronically or by signature. It is recommended that the annual report be signed by the Director or designee each year.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The CAO or designee, PREA manager or department director shall edit specific material from the reports when publication would present clear and specific threat to the safety and security of a facility. The CAO or designee, PREA manager, or department director shall indicate the nature of the material edited.”</p> <p>PREA Coordinator – The PREA Coordinator said personally identifying or confidential information about incidents are not included in annual reports.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>
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115.289	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>PREA Coordinator – The PREA Coordinator said the PREA incident information is securely stored in the Investigative Reporting Intelligence System (IRIS). Access to IRIS is limited to investigators, PREA Site Coordinators, Warden’s and other staff directly involved in incident investigation and review.</p> <p>Missouri DOC Annual PREA Report - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The last two years of PREA Annual Reports were reviewed and found to have a comparison of sexual abuse data from 2013 to 2022. The reports did not contain any personal identifiers.</p> <p>The facility and agency meet this standard based on the information from the PREA Coordinator interview and review of annual reports found on the MODOC PREA</p>

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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. Fulton Community Supervision Center was audited three years ago. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all of their facilities during all audit cycles.</p> <p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with residents in a private room.</p> <p>A notice of audit was sent on January 26, 2024 to be posted six weeks prior to the onsite audit. The email was missed and the notices were posted on March 5, 2024. They will remain posted for six weeks from March 5th. The notice was posted throughout the facility two weeks prior to the onsite audit, notifying inmates they could send confidential correspondence to this auditor. No letters were received prior to the onsite audit from inmates. No correspondence has been received six weeks since the notice was posted.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the Missouri DOC website PREA page found PREA audit reports for all MODOC facilities from 2014 to 2023.</p> <p>The agency has been posting all final audit reports on its website as required by this standard.</p>

Appendix: Provision Findings		
115.211 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.211 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities?	yes
115.212 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (c)	Contracting with other entities for the confinement of residents	
	If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in	na

	emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
115.213 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.213 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)	yes
115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing	yes

	staffing patterns?	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.215 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female residents?	yes
115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enable residents to shower,	yes

	perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes
115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.215 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.216 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes

	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.216 (b)	Residents with disabilities and residents who are limited English proficient	

	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.216 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	yes
115.217 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of	yes

	force, or coercion, or if the victim did not consent or was unable to consent or refuse?	
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?	yes
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes
115.217 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.217 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
115.217 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.217	Hiring and promotion decisions	

(f)		
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.217 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.217 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.218 (a)	Upgrades to facilities and technology	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012 or since the last PREA audit, whichever is later.)	na
115.218 (b)	Upgrades to facilities and technology	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the	yes

	agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	
115.221 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.221 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.221 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.221 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.221 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).	yes

115.222 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.222 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).)	na
115.231 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with	yes

	residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training,	yes

	does the agency provide refresher information on current sexual abuse and sexual harassment policies?	
115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes

	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes
115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent	yes

	the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	
115.234 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a).)	yes
115.235 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	na
	Do medical and mental health care practitioners contracted by	yes

	and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	
115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.241 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:	yes

	Whether the resident's criminal history is exclusively nonviolent?	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes
115.241 (e)	Screening for risk of victimization and abusiveness	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes
115.241 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.241 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess a resident's risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?	yes
115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.241 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes

	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.242	Use of screening information	

(f)		
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.251 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.251 (b)	Resident reporting	

	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve	yes

	with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	
115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf	yes

	of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.252 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to	yes

	alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	
115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes
115.253 (b)	Resident access to outside confidential support services	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.253 (c)	Resident access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.254 (a)	Third party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.261 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

	information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.261 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.261 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	no
	Are medical and mental health practitioners required to inform residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	no
115.261 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.261 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.263 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.263 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.264 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate,	yes

	washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.264 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.265 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.266 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
115.267 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes

	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.267 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.267 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.271 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes
115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.271 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.271 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.271 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.271 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.271	Criminal and administrative agency investigations	

(h)		
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.271 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.271 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	na
115.272 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.273 (a)	Reporting to residents	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency	na

	request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
115.273 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform	yes

	the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.273 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.276 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.276 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.276 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.277 (a)	Corrective action for contractors and volunteers	

	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.277 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
115.278 (a)	Disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.278 (b)	Disciplinary sanctions for residents	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
115.278 (c)	Disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.278 (d)	Disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a	yes

	condition of access to programming and other benefits?	
115.278 (e)	Disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.278 (f)	Disciplinary sanctions for residents	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.282 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	no
115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information	yes

	about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	
115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.283 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive	yes

	information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	
115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.286 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.287 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287	Data collection	

(c)		
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.287 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.287 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.287 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.288 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.288 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.288 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.288 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.289 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes
115.289 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.289 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with residents?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the	yes

	same manner as if they were communicating with legal counsel?	
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes

PREA Facility Audit Report: Final

Name of Facility: St. Joseph Community Supervision Center

Facility Type: Community Confinement

Date Interim Report Submitted: 07/03/2024

Date Final Report Submitted: 11/13/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 11/13/2024

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	05/02/2024
End Date of On-Site Audit:	05/03/2024

FACILITY INFORMATION	
Facility name:	St. Joseph Community Supervision Center
Facility physical address:	3305 Faraon Street, Saint Joseph, Missouri - 64506
Facility mailing address:	

Primary Contact

Name:	Caleb Gentry
Email Address:	caleb.gentry@doc.mo.gov
Telephone Number:	816-236-9750

Facility Director	
Name:	Jamie DuChaine
Email Address:	Jamie.DuChaine@doc.mo.gov
Telephone Number:	816-236-9750

Facility PREA Compliance Manager	
Name:	Caleb Gentry
Email Address:	caleb.gentry@doc.mo.gov
Telephone Number:	

Facility Characteristics	
Designed facility capacity:	40
Current population of facility:	21
Average daily population for the past 12 months:	28
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18+
Facility security levels/resident custody levels:	Field Supervision/ Low
Number of staff currently employed at the facility who may have contact with	58

residents:	
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	0
Number of volunteers who have contact with residents, currently authorized to enter the facility:	29

AGENCY INFORMATION	
Name of agency:	Missouri Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2729 Plaza Drive, Jefferson City, Missouri - 65109
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102
Telephone number:	5737512389

Agency Chief Executive Officer Information:	
Name:	Trevor Foley
Email Address:	Trevor.Foley@doc.mo.gov
Telephone Number:	573-526-6607

Agency-Wide PREA Coordinator Information			
Name:	Darren Snellen	Email Address:	darren.snellen@doc.mo.gov

Facility AUDIT FINDINGS
Summary of Audit Findings
The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

41

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-05-02
2. End date of the onsite portion of the audit:	2024-05-03

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	St Joseph YWCA Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	40
15. Average daily population for the past 12 months:	28
16. Number of inmate/resident/detainee housing units:	2
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	21
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	1
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	2
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	28
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	5
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Residents were chosen randomly based on housing unit. The majority of residents live in one housing unit.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	5
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>No residents interviewed reported having a visual disability. Given the small population size it is less likely and the Unit Supervisor said there were no Blind residents at the time of the onsite audit.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>No residents interviewed reported having a hearing disability. Given the small population size it is less likely and the Unit Supervisor said there were no deaf residents at the time of the onsite audit.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>No residents interviewed reported being limited English proficient. Given the small population size it is less likely and the Unit Supervisor said there were no LEP residents at the time of the onsite audit.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>No residents interviewed reported gay or bisexual at the risk assessment. Given the small population size it is less likely and the Unit Supervisor said there were no LEP residents at the time of the onsite audit.</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>No residents interviewed reported identifying as transgender. Given the small population size it is less likely and the Unit Supervisor said there were no transgender residents at the time of the onsite audit.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>No residents interviewed reported making an allegation of sexual abuse at SJCSC. The facility also reported no allegations of sexual abuse being received in the last year.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>3</p>

69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	SJCSC is a community corrections facility and does not have a segregation unit.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	9
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No

78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☐ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☐ Medical staff
- ☐ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☐ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☐ First responders, both security and non-security staff
- ☒ Intake staff

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
83. Provide any additional comments regarding selecting or interviewing specialized staff.	SJCSC does not have contract medical or mental health staff.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

Documents were requested for staff hired in the last 12 months, veteran staff, and volunteers. Documents were requested for residents that were interviewed.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

0

a. Explain why you were unable to review any sexual abuse investigation files:

The facility reported not have any allegations of sexual abuse in the review period. This was verified by the PREA Unit Manager and Warden.

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	The facility reported not have any allegations of sexual harassment in the review period. This was verified by the PREA Unit Manager and Warden.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- ☒ The audited facility or its parent agency
- ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- ☐ A third-party auditing entity (e.g., accreditation body, consulting firm)
- ☐ Other

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment is the policy that provides the zero-tolerance policy, definitions of sexual abuse and sexual harassment, and the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>b) Based on the organization charts provided, the Missouri Department of Corrections has a PREA Coordinator in the Office of Professional Standards that reports to the Director of that division. The Director of OPS then reports to the MODOC Director.</p> <p>PREA Coordinator Interview – The PREA Coordinator said he has sufficient time and authority to fulfill the duties of the PREA Coordinator for the agency. He oversees the PREA Unit that consists of dedicated investigators and support staff that assist him in managing and monitoring PREA standards compliance and PREA investigation at all facilities in the agency. Each facility has a PREA Compliance Manager that reports to him for PREA Compliance matters.</p>

	<p>PREA Compliance Manager – The Unit Supervisor said he is designated as the PREA Site Coordinator (PCM) at St Joseph CSC. He reports to the Chief Administrative Officer for St Joseph CSC. He is responsible for all PREA Compliance at SJCSC and indirectly reports to the PREA Unit Manager, who is the PREA Coordinator for the MDOC. He said he has the time to oversee the PREA compliance.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.212	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>It was reported on the PAQ that the Missouri Department of Corrections currently does not contract for the confinement of inmates with a private or other governmental agency. The PREA Coordinator stated in his interview the Missouri DOC is not contracting with anyone for confinement of inmates at this time. The District Administrator said the St Joseph Community Services Center does not contract for the confinement of inmates. The facility reported on the PAQ there were no contracts for confinement entered into or renewed.</p>

115.213	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires each facility to “maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse.” “The staffing plan shall consider the facility’s physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.”</p> <p>Staffing Plan Document – The facility provided a one-page document that was titled PPA Shift Staffing Grid. The document contained a breakdown by shift of the number of PPA II and PPA staff allotted for the shift and what the minimum number is for the shift. There was no mention of the other staff at the facility such as administrative or program staff that may be involved in monitoring residents. The plan did not consider the layout of the facility, the security level of residence or the prevalence of PREA incidents.</p>

Facility Director – The District Administrator said she reviews vacancies on a regular basis with the Unit Supervisor/PREA Site Coordinator and HR. The facility has a minimum of two staff per shift with one being female. Overtime is used to cover staff shortages due to call-ins to maintain the two staff minimum. The facility has not fallen below the two security staff minimum in the last year. If there are any deviations from the staffing plan, they would be documented on the shift summary. The Unit Supervisor reviews the shift reports weekly for deviations.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall comply with the staffing plan on a regular basis, deviations from the staffing plan shall be documented and justification for deviations noted.”

A memorandum was provided by the District Administrator that states SJCS has not fallen below the minimum staffing pattern. Shortages would be covered by mandated overtime.

Facility Director - The District Administrator said the facility has a minimum of two staff per shift with one being female. Overtime is used to cover staff shortages due to call-ins to maintain the two staff minimum. The facility has not fallen below the two security staff minimum in the last year. If there are any deviations from the staffing plan, they would be documented on the shift summary. The Unit Supervisor reviews the shift reports weekly for deviations.

PREA Site Coordinator – The Unit Supervisor said the shift minimum is two security staff for the staffing plan. He said the facility has not had a deviation of less than the two staff minimum during the review period. He reviews the shift reports daily.

c) The 2022 SJCS PREA Annual Report was provided as the review of the annual review of the staff plan. The report does discuss an evaluation of the camera and monitoring systems and a section for staffing plan evaluation. The staffing plan evaluation section does state that staffing patterns were adequate. The review does not address prevailing staffing patterns or the resources available to ensure adequate staffing levels and is for the calendar year of 2022 that is outside of the review period for this audit.

CORRECTIVE ACTION REQUIRED: The facility must provide documentation of a complete staffing plan and review the plan based on the requirements of the standard during the review period.

Corrective Action Completed: The review of the staffing plan was completed and documented in a Facility Staffing Plan Review document that was signed by the District Administrator and the Unit Supervisor/PREA Site Coordinator (PCM), and sent to the PREA Unit Manager (PREA Coordinator) for MODOC for review. The review covered thirteen factors that are required in substandard (a) and (c). The staffing plan was documented in the District One STO Staff Listing, SJCS Standard Operating Procedure for Field Residential Staffing and PPA Shift Staffing Grid. The facility meets the provisions of this standard based on the policies, documents, interviews and corrections completed.

Based on the interviews, documents and policies reviewed, this auditor finds the

	facility meets the provisions of the standard.
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115.215	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri Department of Corrections policy IS20-1.3 Searches prohibits cross gender strip searches except in exigent circumstances. Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment also prohibits cross-gender strip searches except in exigent circumstances. The facility reported on the PAQ that no cross-gender strip searches occurred in in the past 12 months. The policies reflect the requirements of the provision for this standard.</p> <p>Document Review -The District Administrator provided a memorandum on the PAQ that says SJCSO did not conduct a cross-gender strip searches during the review period. Zero cross gender strip or body cavity searches were reported on the PAQ.</p> <p>Random Staff Interviews – All female staff said they have been trained how to conduct pat-down searches of the male residents in a cross-gender manner. All staff said they have been trained how to conduct cross gender and transgender pat searches.</p> <p>Resident Interviews – Some residents said they have been pat searched by female staff during the time they have been at SJCSO. They said the search was appropriate, professional and not too invasive. There were no transgender residents at SJCSO during the onsite audit.</p> <p>c) Missouri DOC policy IS20-1.3 Searches requires staff to document all cross-gender strip searches on the cross-gender search form. There was no cross-gender strip search forms presented for review. The policy reflects the requirements for this provision of the standard.</p> <p>Document Review -The Unit Supervisor provided a memorandum through the PAQ that says SJCSO has not had a cross-gender strip search during the review period.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders shall be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with, institutional services, and probation and parole procedures regarding searches.” The policy also requires staff of the opposite gender to announce their presence prior to entering a housing unit. These announcements are to be logged in the housing unit chronological log. The policy reflects the requirements for this provision of the standard.</p>

Tour Observations – SJCSC has one housing unit with a separate shower room and a room with toilets and sinks. All toilets were covered with stall walls with doors. There was an initial set of saloon doors going into the shower area and another that led into the room with stall showers that all had shower curtains that were hung off the floor enough to see feet. Opposite gender staff announcements were observed during the tour. Opposite gender staff announcements were documented in the housing unit log as “PREA Announcements.” A Sign indicating female staff on duty is hung up at the control room window by the living area entrance for hearing impaired inmates.

Random Staff Interviews – Twelve staff were selected at random from shift rosters for interviews. All staff said they felt like the residents could shower and use toilet facilities with enough privacy that female staff could not see their genitals or buttocks. All staff were aware of and hear opposite gender staff make announcements when entering housing units. Female staff said they make an announcement prior to entering the housing areas and bathrooms.

Document Review – Housing unit logs were requested for random dates in every month from January to April of 2024. PREA announcements were found logged multiple times on each shift when female staff entered the housing unit. Shifts with all male staff working documented security rounds with no announcements documented.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not perform strip or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, diagnostic center reception and orientation, and receiving screening intake center.” Missouri DOC policy IS20-1.3 Searches prohibits staff from performing a strip search for the sole purpose of determining an inmate’s gender. The policies reflect the requirements of the provision of this standard. There were no transgender residents at SJCSC at the time of the onsite audit.

Random Staff Interviews – All staff said strip searching a transgender resident solely for determining their genital status was prohibited by policy, not allowed and would be unprofessional.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Custody staff members shall be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs.” The policy reflects the requirements for this provision of the standard.

Random Staff Interviews – The staff said they had been trained how to do cross gender searches and searches of transgender inmates in the search training provided at the academy. The female staff said they have conducted pat searches of male residents based on the cross gender search training.

Resident Interviews – Male residents said they have been pat-searched by female

	<p>staff. The searches were appropriate and not to invasive. None said they had been subjected to a cross-gender strip search.</p> <p>Document Review – Documentation of search training was provided for ten security staff.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.</p>
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115.216	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires staff to “provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” LEP residents will be provided the PREA video transcript and PREA brochure in their native language. If these cannot be translated into their native language, the PREA site coordinator will utilize an interpreter to assist the resident in understanding the material. “Offender interpreters shall not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.”</p> <p>The facility provided a large print version of the MDOC Offender Sexual Abuse and Harassment (PREA) Brochure for visually impaired residents, the printed transcript of the PREA video for hearing impaired residents, and a braille version of the PREA brochure. The PREA posters and were observed on the tour in both English and Spanish. The posters were placed in a location that could be easily read. The PREA brochure was also provided in seven different languages. The District Administrator also provided a memorandum stating resident interpreters have not been used during the review period.</p> <p>Staff Interviews – All Staff said they were aware of an interpretive service that a supervisor can access if needed for an LEP resident. All staff said using another resident to translate is prohibited.</p> <p>There were no limited English proficient residents to interview during the onsite audit.</p> <p>Agency Head – The Assistant Director said the MODOC makes every effort to provide accommodations for inmates and residents that have disabilities or are limited</p>

	<p>English proficient.</p> <p>Document Review – The facility provided a Missouri statewide contract for on-demand interpretive services and sign language services. The interpretive services contract provides access to three companies that can provide over-the-phone interpretive services for LEP people. The contract expires November 2024.</p> <p>PREA Site Coordinator Interview – The Unit Supervisor said the state has a contract that provides on demand interpretive services. The services have not been used in the last year due to not having any LEP residents. An administrative staff can set up access to the service when needed.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>
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115.217	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not hire or promote any person, staff member, or enlist the services of any contractor that may have contact with an offender when it is known that he: a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or c. has been civilly or administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse.”</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background screening, candidate selection, maintenance of employee records, employee discipline, and labor organizations.”</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before hiring new staff members a worksite personnel staff member or designee shall: a. perform a criminal background records check; and b. attempt to contact all prior institutional employers, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background screening.”</p>

HR Staff Interview - staff that cover HR said criminal background checks and pre-employment background checks are completed for all new hires and promotions. She reviews prior discipline issues that would include sexual harassment. Issues with sexual harassment history would be considered in hiring and promotion decisions. If applicants have prior corrections experience, central office HR staff calls the prior employer for a pre-employment PREA check to inquire about substantiated sexual abuse investigations or resignations during a sexual abuse investigation.

Document Review - Criminal background checks for six staff hired in the last 12 months were provided for review. Five out of six were completed after the hire date. Two of the staff hired had marked yes for prior institutional work experience but the PREA employment check was not completed on the form. This does not meet the standard.

d) Missouri DOC policy D2-2.2 Background Investigations states "Contract staff members, volunteers, and student interns shall have a background investigation conducted that consists of the criminal history check and any violations that have been reported to pertinent professional licensing and/or certification organizations if applicable."

SJCSC does not have contract staff.

e) Missouri DOC policy D2-11.14 Annual Employment Requirements Section III. A requires an annual criminal background check to be completed on the birth month of every employee.

Human Resource Staff Interview - staff that cover HR said she completes a criminal background check on staff annually during their birth month.

Document Review - Criminal background checks were provided for fourteen veteran staff that were completed within the last two years.

f) Human Resource Staff Interview - staff that cover HR said new hire staff and staff applying for promotions are asked questions about (a) 1-3 of this standard on applications for employment. The applications are set up in a system by HR staff in central office. Staff are not required to complete a self-evaluation annually and are not asked these questions again. SJCSC does not have contract staff.

Document Review - Documentation of questions pertaining to (a) 1-3 were not provided for the staff hired at SJCSC in the last year. The applications for these staff was requested and have not been received yet.

g) Missouri DOC policy D2-2.2 Background Investigations states "False information regarding substantiated allegations of offender or resident abuse and/or harassment on the employment application shall be grounds for termination."

h) Human Resource Staff Interview - staff that cover HR said if another correctional institution contacts the Missouri DOC to inquire about substantiated allegations of sexual abuse or resignations during investigations of a former

	<p>employee, the HR staff in central office will provide information on the substantiated sexual abuse or resignations.</p> <p>The PREA Coordinator for MODOC provided four examples of PREA information being release upon request to other corrections agencies during the last 12 months.</p> <p>CORRECTIVE ACTION REQUIRED: Criminal background checks must be completed prior to the start/hire date for new staff. Criminal background checks will be provided for any staff hired during the corrective action period. Documentation of questions for (a) 1-3 must be provided for review for staff hired in the last 12 months and determined to meet the standard.</p> <p>Corrective Action Completed: The facility provided the applications for the selected staff hired prior to the onsite audit for review. All had the questions required to meet provision (f) of the standard and were completed prior to the hire date. Criminal background checks and applications were provided for eight staff hired during the corrective action period from May to November 2024. All criminal background checks were completed prior to the hire dates. The applications contained the questions required by provision (f) and were completed prior to the hire date as well.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of the standard.</p>
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115.218	Upgrades to facilities and technology
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) The facility reported on the Pre-Audit Questionnaire and provided a memorandum that states there have been no substantial structural upgrades or changes since the last audit.</p> <p>Agency Head Interview – The Director said the agency designs expansion and modifications to maximize the agency’s ability to protect inmates.</p> <p>Director Interview – The Director said there have been no expansion or modifications since the last PREA audit. If there are any, improving inmate monitoring based on the requirements of the PREA standards would be considered in the design.</p> <p>b) A memorandum was provided through the Pre-Audit Questionnaire that states the video monitoring system was upgraded in March of 2023. Analog cameras were replaced with high definition cameras.</p> <p>Director Interview – The Director said the upgrade to the video monitoring system was completed with the intention of improving the facility’s ability to protect</p>

	<p>residents from sexual abuse.</p> <p>The facility meets this standard based on the information from interviews and documents reviewed.</p>
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115.221	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” The policy also instructs staff to take steps to protect evidence. This may include instructing the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom. If possible, staff should not allow the inmate perpetrator to destroy evidence by preventing showering, changing clothes, eating, drinking, or using the bathroom.</p> <p>Staff Interviews - If a resident reports a sexual assault, all staff said they would ask the resident victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom until the inmate gets a forensic exam or they are relieved. Staff would ensure the alleged resident perpetrator would not destroy evidence in the same way. All said they would protect evidence at the scene until it could be collected by investigators.</p> <p>b) MODOC policy D1-8.13 provides a time frame of 72 hours for possible collection of forensic evidence the same as found in the National Protocol for Sexual Assault Medical Forensic Examinations.</p> <p>The MODOC PREA Coordinator provided a memorandum stating the PREA Unit Investigators use evidence collection protocols discussed in “A National Protocol for Sexual Assault Medical Forensic Examinations.”</p> <p>c) MODOC policy D1-8.13 requires the facility health services staff to contact the on-call SANE staff member if the alleged incident occurred within 72 hours. The policy states “The SANE staff member shall collect evidence according to established forensic procedures for processing and document the exam and finding in the applicable department computer system.” “If the alleged perpetrator is a staff member, the victim shall be transported to the community emergency room for a sexual assault examination to be performed by a SANE or SAFE.”</p> <p>Unit Supervisor Interview - The Unit Supervisor/PREA Site Coordinator said because SJCSC does not have an area for a forensic examination to be performed by a MODOC SANE, the resident would be taken to Mosaic Medical Center if a forensic exam were needed. The exam would be no cost to a resident.</p>

	<p>SJCSC reported no residents reported an allegation of sexual abuse that would require a forensic examination during the review period.</p> <p>Document Review – A copy of Missouri statute 191.0225 was provided for review. The statute requires all medical provider charges for forensic examinations to be billed to and paid by the Missouri Department of Health and Senior Services. No medical provider can charge a victim for the forensic exam. The facility provided a memorandum that states SJCSC did not send a resident for a forensic exam during the review period.</p> <p>d-e, h) The facility provided a memorandum of understanding with the YWCA of St Joseph for victim advocate services at forensic examinations at Mosaic Medical Center and at investigator interviews at SJCSC. The memorandum was signed in January of 2024</p> <p>Victim Advocate Interview – A victim advocate from the YWCA was called to verify the MOU with SJCSC. The YWCA staff said there would be training provided to staff and residents can call a hotline for services in the near future. If a VA needs to see a resident, they would arrange a special visit through the PREA Site Coordinator. She said the YWCA will provide victim advocate services to residents at a forensic examination or at the investigator interview at SJCSC.</p> <p>The facility meets the provisions of this standard based on the information above interviews, policies and documents reviewed.</p>
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115.222	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>Agency Head – The Assistant Director said allegations of are investigated utilizing the PREA Unit or Institutional Investigators. Institutional Investigators investigate allegations of Sexual Harassment and the PREA Unit investigates allegations of Sexual Abuse. These investigations include both administrative and criminal investigations. This includes anonymous and third party allegations.</p> <p>Facility Head Interview – The District Administrator said all sexual abuse and sexual harassment allegations are forwarded immediately to the PREA Unit in central office for investigation. SJCSC does not have an institutional investigator. A Request for Investigation form would be completed and sent to the PREA Unit to initiate the investigation.</p>

	<p>The District Administrator provided a memorandum that states SJCSC did not have a sexual abuse or sexual harassment investigation during the last 12 months.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” This policy was found posted on the Prison Rape Elimination Act page of the Missouri DOC website at https://doc.mo.gov/programs/PREA. Policy D1-8.4 Institutional Investigations covers requirements for investigations in general. The policy is identified as confidential, therefore it cannot be posted on the MODOC website.</p> <p>Investigator Interview – The PREA Unit Investigator said all sexual abuse and sexual harassment allegations received at SJCSC are sent to the PREA unit in a Request for Investigation form that would be completed and sent by the PREA Site Coordinator.</p> <p>The facility meets the provisions of the standard based on the information from interviews, policies and documents reviewed.</p>
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115.231	Employee training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All staff members shall receive initial PREA training during the department's basic training.”</p> <p>PREA Basic Training Curriculum – The PREA Basic training curriculum was provided for review. It covers the zero-tolerance policy of MODOC; staff responsibilities in prevention, detection, reporting and response procedures; inmate’s rights to be free of sexual abuse, sexual harassment and retaliation; staff rights to be free from retaliation; dynamics of sexual abuse; reactions of victims; how to detect signs of sexual abuse; avoiding inappropriate relationships with inmates; and mandatory reporting laws. The curriculum did not cover professional communication with LGBTI inmates. However, The Professional Boundaries lesson plan was provided for review that provides staff information on how to communicate effectively and professionally with LGBTI inmates. This training is all provided at the Basic Academy in pre-service training for new hires.</p> <p>Random Staff Interviews – Staff said the training covered zero tolerance policy; rights of residents and staff; dynamics of sexual abuse, signs and reactions of sexual abuse victims, how to avoid inappropriate relationships with residents, how to respond to a report of sexual abuse, how to protect evidence, and professional communication with LGBTI residents. They could describe the information provided for these topics. All staff said they completed the Basic PREA Training when they</p>

were hired and the PREA Refresher Training every two years. In the years between refresher training, they receive monthly emails with information about PREA and their responsibilities in prevention, detection, and response.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the time of assignment."

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All staff members shall complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. Years in which an employee is not required to complete training, the facility site coordinator shall provide refresher information on current sexual abuse and sexual harassment policies."

The District Administrator provided a memorandum that states staff are provided with refresher information between trainings via email from the PREA Unit Manager.

PREA Coordinator Interview - The PREA Unit Manager said he sends out emails to all facilities once a month that provides refresher information from the PREA training.

Document review - PREA refresher information slides and emails were provided for April and May 2024 in the OAS.

PREA Refresher #1-12 - After the PREA Basic is completed at academy, staff are required to complete a PREA Refresher training modules every two years. These modules were reviewed and found they cover the required topics (a) 1-10.

Staff Interviews - veteran staff said they complete a PREA Refresher training every 2 years and receive emails monthly between bi-annual training that provide information about PREA. Staff hired in the last year said they have received emails since completing the PREA Basic. All staff demonstrated knowledge of all required topics.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All completed PREA training requires a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed the training. This form must be routed through the facility training officer or regional training coordinator."

Document Review - Records of PREA training completion were requested for six staff hired in the last year and fifteen veteran staff. Training completion documents were provided for all six new hire staff. Training completion documents for fourteen veteran staff were provided with all being completed within the last two years.

The facility meets the standard based on the interviews, policies and documents reviewed.

115.232	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All part-time employees, volunteers, and contract staff members shall receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training."</p> <p>Training Curriculum – The PREA training curriculum for volunteers and contractors was provided for review. The curriculum provides volunteer and contract staff with the MODOC zero-tolerance policy, rights of inmates, signs of sexual abuse, MODOC's response process, dynamics of sexual abuse, reactions of victims, and how to respond to a report of sexual abuse.</p> <p>Volunteer Interview - A volunteer said he has completed the PREA training every year of the three years he has volunteered at the facility. He said the training covered the zero-tolerance policy, rights of residents to be free from retaliation, sexual abuse and sexual harassment, what his responsibilities are if an resident reports sexual abuse or sexual harassment to him. He said he is required to report any knowledge or suspicion of sexual abuse or sexual harassment. He is required to notify the shift supervisor immediately.</p> <p>c) Document Review – Documentation of PREA training completion was requested for six volunteers. The PREA Training Acknowledgement forms were provided for the six volunteers randomly selected from the volunteer list the facility provided. All six completed the training in 2024.</p> <p>The facility meets the provisions of this standard based on the information above from interviews, policies and documents reviewed.</p>

115.233	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders." The policy requires the facility to have the PREA offender brochure in several recognized languages. If the brochure is not available in the inmate's language then an</p>

	<p>interpretive service will be utilized to provide the information. The PREA offender brochure was provided in seven additional languages. The policy also requires the facility to make PREA reporting information available or visible to all inmates through posters, the offender rulebook, and the brochure. Policy requires the inmates to sign an acknowledgement receipt for viewing the video and receiving the PREA offender brochure.</p> <p>Tour Observations – A PREA education was not observed during the onsite audit as there were no new residents received. The area the education is provided may be in the dayroom or in an office depending on the number of residents received. Staff described the process and how the information is provided to residents. Information regarding reporting sexual abuse and sexual harassment and victim services was posted in the resident living areas, on the wall by the telephones, in the resident dayroom and at the entrance to the facility. The information was in both English and Spanish and was placed where it could easily be read by residents.</p> <p>Intake Staff Interview – The staff that provide the PREA education said he provides the PREA brochure on the first day, shows a PREA information video and briefly explains how residents can report. He goes over the information in depth 2 days later. He covers the zero-tolerance policy for sexual abuse and sexual harassment, residents rights and how to report. He provides information about where to make external reports and victim advocate services. The PREA Education is provided to all new residents regardless of transferring from another MODOC community supervision facility. If a resident has cognitive disabilities or can't read, he will read over the information with the resident individually to ensure they understand the information.</p> <p>Resident Interviews – Ten residents were interviewed. All said they were provided the brochure and video the first or second day of arrival. Staff covered the information again with them in a group or individually a few days later. Zero-tolerance and resident rights were covered during the orientation. All residents said they see the PREA information posters in the facility.</p> <p>Document Review – The Offender Sexual Abuse and Harassment Acknowledgement forms were provided for review for ten residents. The PREA education was provided within the first week of arrival at the facility.</p> <p>The facility meets the provisions of this standard based on the information above from interviews, policies and documents reviewed.</p>
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115.234	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states

	<p>“Investigators assigned to investigate offender sexual abuse allegations shall receive specialized PREA investigator training.” The policy reflects the provision’s requirement.</p> <p>Training Curriculum – The NIC PREA: Investigating Sexual Abuse in a Confinement Setting was reviewed by this auditor. The training covers the investigation standards, Miranda, Garrity, evidence collection, forensic examinations, interviewing techniques, understanding the victim, and evidence requirements for substantiating administrative cases or for making a prosecutorial referral. The curriculum covered the requirements of the standard.</p> <p>Investigator Interview – The PREA Unit Investigator said she completed the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting and the advanced NIC investigations course. She also has completed sexual abuse investigation training through VAWA as well. She said the PREA Unit investigates all sexual abuse and sexual harassment cases for SJCSC.</p> <p>Document Review – The NIC PREA Investigations training certificates were provided for the thirteen PREA Unit Investigators.</p> <p>The facility meets this standard based on the interviews, policy and documents reviewed.</p>
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115.235	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Health services staff members shall receive specialized PREA medical and mental health training.”</p> <p>The District Administrator provided a memorandum stating SJCSC has not employed medical or mental health staff during the review period.</p> <p>Unit Supervisor Interview – The Unit Supervisor said SJCSC does not employ or contract medical and mental health staff.</p> <p>The standard is not applicable as SJCSC does not employ or contract medical or mental health staff.</p>

115.241	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>

Auditor Discussion

a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All offenders shall be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding offender housing assignments, transgender and intersex offenders and the probation and parole procedures regarding housing assignments, transgender and intersex clients, and contracted residential facilities." The policy requires an assessment for risk of victimization and abusiveness.

Risk Screening Staff Interviews – The staff that completes the initial risk screening assessment said he meets with residents individually on the first day they arrive to complete the initial risk screening. He asks the residents questions about prior victimization, sexual orientation, gender identity, disabilities, prior perpetration of sexual abuse, and if the resident fears victimization. He uses the resident record to obtain additional information about criminal history, conduct history, size, age, and documented disabilities. The assessment is completed within 72 hours of the resident arrival at SJCSC. The staff that completes the re-assessment said he asks the same questions that are asked for the initial screening assessment. He asks about prior victimization, sexual orientation, gender identity, and if the resident feels vulnerable to sexual abuse. He reviews the resident record to complete a full assessment within 30 days.

Resident Interviews – All of the residents could recall being asked questions about prior victimization; identifying as lesbian, bisexual, transgender, or intersex; disabilities, and feelings of vulnerability to sexual abuse. Most could recall being asked the questions a second time around a month after arriving. Some admitted they just couldn't remember being asked a second time.

b) Missouri DOC policy IS5-2.3 Offender Internal Classification states "CCMs will conduct a new internal classification within the first 72 hours at that facility and the offender will be housed in accordance with the new internal classification score." The policy requires a new risk assessment to be completed within 72 hours of arrival at the facility.

Document Review – The Initial Risk Assessments for ten residents were reviewed. All initial assessments were completed within 72 hours of arrival at SJCSC.

c) Missouri DOC policy IS5-2.3 Offender Internal Classification states "Facilities shall assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities." The risk assessment was provided for review. The factors in the assessment were found to be objective.

d) Risk Screening Staff Interview – The staff that completes the initial risk

screening assessment said he meets with residents individually on the first day they arrive to complete the initial risk screening. He asks the residents questions about prior victimization, sexual orientation, gender identity, disabilities, prior perpetration of sexual abuse, and if the resident fears victimization. He uses the resident record to obtain additional information about criminal history, conduct history size, age, and documented disabilities.

Document Review – A Risk of Victimization and Abusiveness Screening Tool was reviewed and found to assess risk of victimization for the following factors: disabilities; age; resident physical stature; prior incarceration; prior conviction for sex offense with a Child or Adult victim; nonviolent history; homosexual or bisexual, gender non-conforming that provided the example of transgender or intersex identity; prior victim of sexual abuse; and perception of vulnerability to being sexually assaulted. Inmates are not detained solely for civil immigration in the MODOC. The screening tool does not clearly assess for the resident identifying as or perceived to be transgender or intersex. Using the word homosexual is not clearly instructing staff to assess for is or perceived to be gay or lesbian. The screening tool does not meet this provision of the standard.

e) Risk Screening Staff Interview – The staff that complete the initial assessment said he reviews the record for sex offense convictions, violent offense convictions, and prior conduct for violence or sexual abuse.

Document Review - The Risk of Victimization and Abusiveness Screening Tool was reviewed and found to assess risk of abusiveness for the following factors: Committed sexual assault, molestation or rape at any time in their life and history of violence on others. The former assesses for prior acts of sexual abuse and the latter assesses for prior convictions for violent offenses. It does not appear these two factors are assessing for prior institutional violence or sexual abuse. This does not meet this provision of the standard.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders shall be reassessed within 30 days of arrival. The reassessment shall consider additional relevant information received by the facility after the initial intake screening.”

Risk Screening Staff Interview - The staff that completes the reassessment said he asks the same questions that are asked for the initial screening assessment. He asks about prior victimization, sexual orientation, gender identity, and if the resident feels vulnerable to sexual abuse. He reviews the resident record to complete a full assessment within 30 days.

Document Review – Five risk screening re-assessments were reviewed for the residents that had been at SJCSC for more than 30 days. Five of the ten did not get the reassessments yet. Of the five reviewed, one was completed within 30 days of arrival at SJCSC.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The offender's risk level shall be reassessed when warranted due to a referral,

incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness.”

Risk Screening Staff Interview – The staff that complete risk screenings said if there was an incident of sexual abuse at SJCSC or other information was received that changed the assessment, he would complete another reassessment.

h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The offender shall not be disciplined for refusing to answer or not disclosing complete information during the assessment.”

Risk Screening Staff Interview – The staff said inmates do not have to answer the questions during the risk assessment interview. If they refuse, they cannot be disciplined.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The District Administrator (CAO) or PREA site coordinator shall control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders.”

PREA Coordinator Interview – The PREA Coordinator said information obtained for the risk assessment is confidential and access to the electronic system the assessments are completed in is controlled and limited to the staff that need to complete assessments and the staff involved in reviewing them.

Risk Screening Staff interview – The staff said information gathered to complete the risk assessment is confidential and limited to the staff that conduct the risk screenings. Access to the electronic system (MOSIS) is limited to staff that complete the assessments or other staff directly involved reviewing assessments.

CORRECTIVE ACTION REQUIRED: The Risk of Victimization and Abusiveness Screening Tool must be modified to meet provision (d) and (e). Once the modification is approved, completed assessments must be provided for review of use within required time frames in the standard.

Corrective Action Completed: A revised set of risk screening tool completion instructions and the revised risk screening tool was sent to the facility by the PREA Coordinator. The revised risk screening tool Risk of Victimization Factor #7 was changed to Resident is, or is perceived to be gay, lesbian or bisexual, Factor #8 was changed to Resident is or is perceived to be transgender, intersex or gender non-conforming. A Risk of Abusiveness Factor #13 was added Resident has a history of prior institutional violence or sexual abuse, as known to the agency. The changes meet the requirements of the standard. The facility began using the revised risk screening tool August 2, 2024. All intake assessments and reassessments were provided for review that were completed in August, September and October. A total of twenty-one intake assessments and twelve 30-day reassessments were reviewed. All intake assessments were completed within 72 hours of the resident date of arrival. All reassessments were completed within 30 days of the resident date of arrival. The documents reviewed demonstrate the risk assessment that meets the

	<p>standard being in use over a period of 3 months and is now part of the standard practice.</p> <p>Based on the information from corrective actions, interviews, policies and documents reviewed, this auditor finds the facility meets the standard.</p>
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115.242	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This shall be in accordance with the institutional services procedures regarding offender housing assignments, transgender and intersex offenders, offender recreation and activities, and probation and parole procedures regarding community supervision centers, the community release center, and contracted residential facilities.”</p> <p>SJCSC Standard Operating Procedure: Housing Assignment requires residents to be placed in cubicles based on the Risk of Victimization/Abusiveness Status. These are the results of the risk screening assessment. Residents that have a result for risk of victimization are placed in the center cubicles for better observation by staff through the living area entrance.</p> <p>Risk Screening Staff – Staff said the risk screening assessment results are used to place residents in the living area. Sigmas and Alphas cannot be in the same cubicle. Sigmas are placed in the center/front of the living area so staff can observe the better from the control room and hall through the living area entry.</p> <p>PREA Compliance Manager – The Unit Supervisor/PREA Site Coordinator said residents that are Sigma are placed in the center of the living area for better observation from the control room. Sigma and Alpha are never placed in the same cubicle. If there was a resident that is deemed high risk for victimization, the resident can be placed in the extra living are that only houses two residents and had its own bathroom.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive.”</p> <p>Risk Screening Staff said the placement of residents in the living area is based on an</p>

individual review of the risk screening results.

c) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee is responsible for determining a permanent housing assignment for each transgender or intersex offender, and prior to this assignment shall meet with each offender to determine his vulnerability within the general population and length of time living as the acquired gender. Transgender and intersex housing assignments shall not be made based solely on genitalia but must consider the offender’s health and safety and the security of the facility through a review of the respective classification, medical and mental health records.”

Missouri DOC policy IS5-3.3 Transgender and Intersex Offenders provides the process for review of an offender that has identified as transgender or intersex at the risk assessment. The staff that conduct the risk assessment notify the PREA Site Coordinator of the transgender or intersex identification. The Transgender Committee is consists of the PREA Site Coordinator, medical administrator, mental health chief, medical director. The Transgender Committee has an initial meeting with the offender. The offender then meets with Mental Health to be reviewed for gender affirming items, hormone therapy treatment consideration, and discuss health and safety concerns. The Transgender Committee completes the Transgender Committee Review form and forwards it to the Transgender Review Team in central administration. The Transgender Review Team consists of the PREA Coordinator, Deputy Division Director, Director of Rehabilitative Services.

The MODOC Division of Probation and Parole procedure P4-4.4 Transgender or Intersex Clients provides procedures for the Transgender Committee at a Community Supervision Center. The policy states the CSC Transgender Committee is comprised of the District Administrator, Unit Supervisor, a Community Transition Officer II, and the clients Probation and Parole Officer. The committee considers the historical overview of the client’s transgender or intersex status that includes the status of transition, amount of time living as the identified gender, and the client’s views of safety. The committee decision is required to be made within 3 days of arrival. During that 3 days, the resident will be place in a bed assignment based on the risk screening results.

PREA Site Coordinator - The Unit Supervisor said SJCSC has not had a transgender resident in the last year. If a resident does identify as transgender at the risk screening or anytime after that, the resident would meet with the Transgender Committee to review facility housing placement, shower arrangements and gender affirming items. The facility documents recommendations on the Transgender Committee Review form and sends it to the PREA Coordinator for the Transgender Review Team in central administration to make a final decision.

PREA Coordinator – The PREA Coordinator said the facility Transgender Committee makes recommendations and sends the Transgender Review form him to present to the Transgender Review Team in central administration. The Transgender Review Team members are the PREA Coordinator, Deputy Division Director, and Director of Rehabilitative Services. The review gives serious consideration to the transgender

	<p>or intersex resident's views of vulnerability and safety. The review also considers history of the resident's status as transgender or intersex; institutional adjustment; risk assessment history; PREA investigation involvement; program assignments; medical history; special accommodations; and security concerns of the resident or staff. The Transgender Review Team makes a final decision within 10 days and sends a copy back to the facility.</p> <p>d) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee shall meet with the offender within 10 working days of either the offender's arrival to the facility or upon learning the offender's transgender or intersex status and every 6 months thereafter."</p> <p>The Unit Supervisor said there were no transgender residents in the last 12 months. The program is a 6 month program. Most transgender residents will be released at the time the next review is required, however if for some reason they are still there, the review would be completed.</p> <p>e) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee review shall include the following: (1) Offender's view of his vulnerability."</p> <p>PREA Site Coordinator - The Unit Supervisor said if a transgender resident chose to shower separate from the other residents, a two person separate living area bathroom is separate from the main bathroom and would be offered as an alternative. The Transgender Committee would discuss shower arrangement options with the transgender resident.</p> <p>f) PREA Site Coordinator - The Unit Supervisor said gay, bisexual, transgender, and intersex residents are not placed in a dedicated housing unit.</p> <p>At the time of the onsite audit, there were no gay, bisexual or transgender residents to interview.</p> <p>The facility meets the standard based on the information obtained from interviews and policies reviewed.</p>
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115.251	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request</p>

(IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline, and. advocacy agency.” The methods of reporting are communicated to inmates in the PREA offender brochure and resident handbook provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC, report to any staff, or calling the PREA hotline toll free.

Document Review – the resident handbook was provided for review. The PREA information is on the third page of the handbook and is the first information provided. The methods of reporting are tell any staff or write any staff; write to the Missouri Department of Public Safety, Crime Victim’s Unit; or call the PREA hotline. The PREA brochure contains the same reporting information as the resident handbook.

Tour Observations – PREA reporting information posters were observed in resident living areas, dayroom, facility entrance/visiting area, and by the resident phones. The posters were in English and Spanish. They were posted where residents could easily read them.

Random Staff Interviews – All staff said residents could report sexual abuse and sexual harassment either verbally or in writing to any staff and by calling the PREA hotline.

Resident Interviews – All residents said they could report sexual abuse or sexual harassment, retaliation or staff neglect of duty by calling the PREA hotline, telling any staff, writing to staff or writing anonymous to an outside organization. Some said their family could report by calling the hotline or the facility. Some knew they could file a grievance to make a report.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail and not subject to examination.” The policy requires an external reporting method that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure.

PREA Site Coordinator - The Unit Supervisor said residents can write to the Department of Public Safety, Crime Victims Unit if they want to report outside of the MODOC. This correspondence is privileged and not subject to review by staff. Postage is covered and the resident can leave their name off of the envelope and correspondence if they want to remain anonymous.

Resident Interviews – residents said they were told at intake they can write to an outside organization to report anonymously. They also see it on posters in the facility. Some recalled that it was the Crime Victims Unit with the Department of Public Safety.

Tour Observation – PREA reporting posters were observed throughout the facility.

	<p>The posters provided information about reporting to the Crime Victims Unit by writing and the resident can remain anonymous.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure.”</p> <p>Random Staff Interviews – Staff said they were required to receive reports from residents or third parties both verbally and in writing. All staff said they would have to immediately report the information to their supervisor or the Unit Supervisor. Staff are required to document the report in an interoffice communication to their supervisor and the Unit Supervisor.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct.” The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.</p> <p>Random Staff Interviews – All staff said they could make a private report by talking privately to their supervisor, the Unit Supervisor or by calling the PREA hotline or ethics line. They could make the call when off work and could be anonymous.</p> <p>The facility meets the provisions of this standard based on the information above from interviews, policies and documents reviewed.</p>
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115.252	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>b) Missouri DOC policy D5-3.2 Offender Grievance states “The department shall not impose a time limit on when an offender may submit a complaint regarding an allegation of offender sexual abuse.” “The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse.” “Nothing in this section shall restrict the agency’s ability to defend against an offender lawsuit on the ground that the applicable statute of limitations has expired.” The policy allows for any complaints regarding sexual abuse to bypass the informal process and proceed immediately to grievance stage.</p>

c) Missouri DOC policy D5-3.2 Offender Grievance states "The department shall not require an offender to use the informal grievance process or to otherwise attempt to resolve with staff members, an alleged incident of offender sexual abuse."

d) Missouri DOC policy D5-3.2 Offender Grievance states "Offender grievances alleging sexual abuse shall be processed as follows: If determined to be a non-emergency the CAO or designee shall respond within 30 calendar days of receipt. Non-emergency offender grievance appeals alleging offender sexual abuse shall be processed as follows: a response shall be provided as soon as practical, but no later than 60 calendar days of receipt. Computation of the 60 day time period shall not include the days between the offender's receipt of the offender grievance response and receipt of the offender grievance appeal by the offender grievance unit at central office. Appeals shall be referred to the deputy division director or designee. An extension of time to respond, of up to 70 calendar days, may be claimed if the normal time period for response is insufficient to make an appropriate decision. The offender shall be notified in writing of such extension and shall be provided a date by which a response shall be provided. During the administrative process, including the offender grievance appeal level, if the offender does not receive a response within the time allotted for a reply, including extension, the offender may proceed to the next level of the offender grievance process."

The facility reported on the PAQ there were no residents that reported sexual abuse through a grievance during the review period. The Facility Director provided a memorandum that states SJCSC did not receive a grievance from a resident during the audit period.

e) Missouri DOC policy D5-3.2 Offender Grievance states "Third Party Reporting: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, shall be permitted to assist offenders in filing requests for grievances or appeals relating to allegations of offender sexual abuse. This assistance cannot interfere with the safety and security of the institution. When a staff member receives the documentation from the reporting third party, it shall be attached to the grievance form and shall immediately be recorded in accordance with this procedure. A copy of the documentation shall also be forwarded to the CAO or designee in order to be attached to the possible investigation or inquiry. The CCM shall attempt to discuss the issue with the offender (victim) prior to developing a response to confirm if the alleged victim agrees to have the request filed on his behalf. If the offender declines to have the request processed on his behalf, the CCM shall document the offender's decision and the complaint shall be considered withdrawn for grievance purposes."

f) Missouri DOC policy D5-3.2 Offender Grievance states "If the CAO or the PREA site coordinator determines that the complaint meets the definition of a PREA emergency grievance, the grievance shall be addressed as follows: The CAO or designee shall prepare an initial response which shall be attached to the grievance and provided to the offender within 48 hours of receipt of the initial filing date. The offender shall sign and date the response. A final response from the CAO or

	<p>designee shall be provided to the offender within 5 calendar days from the initial filing date. The offender shall sign and date the form. The initial and final response for the grievance shall document the department's determination whether the offender is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance."</p> <p>The facility reported on the Pre-Audit Questionnaire no emergency grievances reporting imminent risk of sexual abuse during the review period. The Facility Director provided a memorandum stating no resident filed a grievance that reported an imminent risk of sexual abuse.</p> <p>g) The District Administrator provided a memorandum that says there were no sexual abuse grievances that were filed in bad faith during the review period.</p> <p>The facility meets the provision of this standard based on the information from interviews, policies and documents reviewed.</p>
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115.253	Resident access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall offer alleged victims of offender sexual abuse, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, during the investigative process. When an allegation of sexual harassment is forwarded for investigation, the alleged victim of sexual harassment will be offered a victim advocate. Offenders shall be allowed to communicate with an advocate by mail or special visit in a confidential manner as possible to maintain safety and security of the institution."</p> <p>Resident Interviews - Residents were asked if they were told there are services available for victims of sexual abuse and sexual harassment. They could recall staff telling them at orientation about victim services. They knew one of the staff was a victim advocate and that they could write to organizations they see on posters on the wall. One resident that reported sexual abuse was offered a victim advocate when she reported. She said she saw the staff victim advocate.</p> <p>Tour Observations - During the tour, signs that provided information about two victim advocate organizations were observed posted on the walls by the phones and in the living areas. The PREA brochure that is provided at intake informs residents a victim advocate will be provided if requested. A copy of the poster and PREA brochure was provided through the PAQ.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Before being given access to a victim advocate, the offenders shall be informed of</p>

	<p>the extent to which communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory reporting laws.”</p> <p>Victim Advocate Posters – Victim Advocate posters were observed in living area and by the phones on the facility tour. The posters provided the contact information to Just Detention International and the Rape, Abuse and Incest National Network. This auditor contacted Just Detention International and was informed they had not received any correspondence during the review period. The posters inform inmates that telephone calls are monitored and that mail to these organizations is confidential and not subject to examination.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If a facility is unable to enter into a MOU with the advocacy center, the attempt shall be documented and advocacy services shall be provided by a qualified staff member.”</p> <p>The facility provided a memorandum of understanding with the YWCA of St Joseph for victim advocate services at forensic examinations at Mosaic Medical Center and at investigator interviews at SJCSC. The memorandum was signed in January of 2024</p> <p>Victim Advocate Interview – A victim advocate from the YWCA was called to conduct to verify the MOU with SJCSC. The YWCA staff said there would be training provided to staff and residents can call a hotline for services. If a VA needs to see a resident, they would arrange a special visit through the PREA Site Coordinator. She said the YWCA will provide victim advocate services to residents at a forensic examination or at the investigator interview at SJCSC.</p> <p>The facility meets the provisions of this standard based on the information from tour observations, interviews, policies and documents reviewed.</p>
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115.254	Third party reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Tour Observations – Posters with information about reporting sexual abuse and sexual harassment were posted in the entrance/visiting area, living areas, and dayroom.</p> <p>MODOC PREA Webpage – The Missouri DOC PREA webpage provides information under the Friends and Family section for reporting sexual abuse and sexual harassment by calling, writing or emailing. This was observed at https://doc.mo.gov/programs/PREA.</p>

	<p>A test report was sent on the PREA email prior to the onsite audit. A message was received back in two days acknowledging the message was received the same day it was sent. A test report was made to the PREA hotline after the onsite audit. The Missouri DOC PREA Coordinator emailed back acknowledging receiving the call within 24 hours.</p> <p>Resident Interviews – Most residents knew their family could report sexual abuse or sexual harassment for them if they contacted the facility or call the PREA hotline.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.261	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Failure to report offender sexual abuse is a Class A misdemeanor in accordance with Missouri state statute. All staff members, shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure.”</p> <p>Random Staff Interviews – All Staff said they are required to report all information, knowledge, or suspicion of sexual abuse or sexual harassment, retaliation, or staff neglect to report. Staff said they are mandated reporters by state law. The information can be provided verbally initially and then in a written report as soon as possible.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions.”</p> <p>Random Staff Interviews – Staff said the information about an incident of sexual abuse or sexual harassment they receive from a resident is confidential and can only be shared with staff that are directly involved in the response. They cannot talk about an ongoing investigation with other staff.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health staff members shall inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes.”</p>

	<p>St Joseph CSC does not have medical staff or mental health staff.</p> <p>d) A search of the internet found reports of sexual abuse of a vulnerable adult must go to Adult Protective Services at the Department of Health and Senior Services.</p> <p>Facility Director Interview – The District Administrator said SJSCS does not house residents under 18 years of age. If the resident fit the definition of a vulnerable adult under state law, a report of sexual abuse would be provided to the Adult Protective Services as required.</p> <p>e) Facility Director Interview - The District Administrator said all allegations of sexual abuse and sexual harassment are referred to the investigators in the PREA Unit at central administration for the MODOC. SJCS does not have investigators.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.262	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, shall immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist.” The facility reported zero incidents of imminent risk of sexual abuse in the past 12 months.</p> <p>Agency Head Interview – The Division Director said the facility would immediately remove an offender from a situation that is a substantial risk of imminent sexual abuse. The facility could move the offender to another work, program, housing assignment or place the offender in protective custody and transfer to another facility.</p> <p>Facility Director Interview - The District Administrator said if a resident reports a substantial risk of imminent sexual abuse, the supervisor on the shift will immediately notify her. The supervisor at the facility will place the victim in the small separate living area to separate from the alleged perpetrator. The PREA Unit would be immediately contacted. The facility has not had an incident of risk of imminent sexual abuse in the last 12 months.</p> <p>Random Staff Interview – Staff said if a resident was at risk of imminent sexual abuse, they would immediately try to determine who the perpetrator is and separate from the victim. The victim could be placed in a separate small living area</p>

	<p>and staff would stay with her.</p> <p>The facility meets the standard based on the information from interviews and policies reviewed.</p>
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115.263	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving an allegation that an offender was sexually abused while confined at a facility outside of the department, the CAO or designee or the appropriate office shall ensure the outside facility is notified of the allegation within 72 hours. The CAO or designee shall maintain documentation of the allegation received and when the outside facility was notified with the allegation.”</p> <p>Facility Director Interview – The District Administrator said if a resident reports to SJCS staff an incident of sexual abuse that occurred at another facility, the staff will document the information in a report and provide the report to the shift supervisor and her. She said she will call the other facility to provide an immediate notification and then send the information to the facility head via email within 72 hours. If the investigator for the other facility needs additional information from the resident, she will assist by making the resident available to the investigator or contacting a PREA Unit Investigator. She said the facility has not had a resident report sexual abuse that occurred at another facility during the last 12 months. This was reported on the PAQ.</p> <p>d) Facility Director Interview – The District Administrator said if she is contacted by another facility head about a report of sexual abuse from a former SJCS resident, she will forward the report to the PREA Unit and request an investigation. She said SJCS has not received a report of sexual abuse that occurred at SJCS from another facility in the last 12 months.</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>

115.264	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states</p>

	<p>“In the event of an allegation of a penetration act, the first responder shall take the following steps: (1) Ensure the safety of the victim. (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable. (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (4) The shift supervisor shall make telephone notifications and respond as outlined in the facility’s coordinated response to offender sexual abuse protocol.”</p> <p>Random Staff Interviews – Security Staff said if a resident reports being sexually assaulted within the last 72 hours they would instruct the victim to not change clothes, shower, brush teeth, eat drink, smoke or use the restroom in order to protect evidence from being destroyed. Non-security staff said they would instruct the victim not to change clothes, shower, brush teeth, eat drink, or use the restroom in order to protect evidence from being destroyed. They would then notify security staff, specifically the supervisor on the shift, and wait for security staff to come take custody of the inmate. All staff said they would separate the victim from other residents and keep him safe.</p> <p>The District Administrator provided a memorandum that states there were no sexual abuse allegations during the review period.</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>
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115.265	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>The facility provided Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment, P4-4.5 Prison Rape Elimination Act, SJ5-5.1 Prison Rape Elimination Act Protocol as the coordinated response plan for SJCSC. Though D1-8.13 has a section that provides guidance to facilities on the development of a coordinated response plan, an agency policy cannot be used as the facility plan. The SJ5-5.1 is a facility policy and provides direction to first responders, it does not provide the response of medical and mental health staff, investigators and facility leadership. It requires the supervisor that is notified of an allegation of sexual abuse to follow the Coordinated Response Protocol for CSC’s. The Coordinated Response Plan for SJCSC was provided after the onsite audit. The plan provides the response protocol for first responders, shift supervisors, PREA Site Coordinator, District Administrator (COA), and PREA Unit Investigators. SJCSC does not have medical or mental health staff and the plan requires an outside referral. The plan requires the PREA Unit Investigator to respond to the facility but also allows the facility to call local law</p>

	<p>enforcement to assist in response to a penetration event. However, the PREA Unit Investigator will conduct the investigation.</p> <p>PREA Coordinator Interview – The PREA Unit Manager said the CSC Coordinated Response Protocol does allow the facility to call local law enforcement, but the PREA Unit Investigator will conduct the investigation. Local law enforcement will only assist in the response.</p> <p>Facility Director – the District Administrator said if a sexual assault was reported or there was an imminent risk of sexual abuse allegation, the staff would follow the Coordinated Response Plan Protocol that provides direction to first responders and the shift supervisor for immediate response. The shift supervisor would secure an alleged resident perpetrator in the isolation room and make the required notifications. The resident victim may have to be sent out to the hospital for medical care and possible forensic examination.</p> <p>The facility meets the standard based on the information from the policies and plan provided and the interviews.</p>
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115.266	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) MDOC policy D2-11.6 Labor Organization states “Per the Prison Rape Elimination Act, the department shall not enter into or renew any collective bargaining agreements or other agreements that limit the department’s ability to remove alleged staff sexual abusers from contact with any offender or resident pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.”</p> <p>Agency Head Interview – The designee for the MODOC Director said the Missouri DOC does have an active bargaining unit agreement, but it does not limit the agency’s ability to remove staff alleged to have committed sexual abuse away from inmates during the investigation the same as other staff.</p> <p>PREA Coordinator Interview – The PREA Coordinator said the Missouri DOC has a collective bargaining agreement for staff, but it does not prevent the removal of staff from contact with an offender that alleged sexual abuse by the staff. He said the agreement has expired and has not been renewed.</p> <p>Document Review – the expired agreement was provided for review. The agreement presented expired in October of 2013. The MODOC does not have a labor agreement that prevents the removal of staff during an investigation of sexual abuse or sexual harassment.</p>

	The facility meets the standard based on information from interviews, policies and documents reviewed.
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115.267	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA site coordinator shall ensure victims, individuals who report sexual abuse, and those that cooperate with offender sexual abuse investigations are monitored and protected from retaliation.”</p> <p>The facility had no allegations of sexual abuse or sexual harassment and had no retaliation monitoring as a result.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires the PREA Site Coordinator to offer emotional support services to offender victims, witnesses, reporters, staff reporters and staff witnesses.</p> <p>Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.</p> <p>Facility Director – The District Administrator said the Unit Supervisor is conducting the retaliation monitoring. If resident retaliation is suspected or reported, we would meet with the resident and separate them by moving the resident that is retaliating to the small living area that is separate from the main living area if the circumstances allow. Progressive discipline may be used. If the retaliation is serious, the resident retaliating can be removed from the program/facility. If staff are retaliating, we would separate the staff from the resident area or put them on a temporary suspension depending on the circumstances and use progressive discipline.</p> <p>Staff Designated for Monitoring – The Unit Supervisor said he is designated to conduct retaliation monitoring. He said there have been no allegations of sexual abuse or sexual harassment and has not conducted monitoring during the last year. If he had to monitor for retaliation, he would review bed change requests, a change in privileges and conduct. Residents do not have jobs and are all in the same program. If there was suspected retaliation by a resident, he could move them to the small living area to separate the residents. If the retaliation was serious, the resident would be removed from the program. Retaliation involving staff would result in an investigation and placing the staff on a no contact assignment until the investigation is completed. The staff would be subject to progressive discipline.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states</p>

"The alleged victim of offender sexual abuse shall be monitored for a minimum of 90 days to assess any potential risk or act of retaliation. The assessment-retaliation status checklist form shall be used during each of the assessment interviews. If the victim expresses fear of retaliation, monitoring shall continue for an additional 90 day period or until the victim or reporter is no longer in fear of retaliation or if the investigation is unfounded."

Unit Supervisor – The Unit Supervisor said he would meet with the resident victim for the initial meeting soon after the report is made and then meets with them every 30 days for up to 90 days. To monitor for retaliation, he reviews conduct, changes in bed assignment or loss of privileges. She also monitors the provision of emotional support services. He said he also asks the resident if they think someone is retaliating against them. If there is retaliation, he will have it investigated immediately. If there is a need to continue monitoring, he can extend it for 90 days.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Monitoring shall include face-to-face status checks."

Unit Supervisor – The Unit Supervisor said the meeting with the resident is face to face every 30 days for a total of four meetings.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Reporters and witnesses shall be monitored for retaliation at the minimum of one time utilizing the assessment-retaliation status checklist form. If no retaliation is reported, monitoring will cease." This requirement of the policy should include inmate reporters. Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims.

Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.

Unit Supervisor – The Unit Supervisor said if witnesses or other residents or staff that cooperate with an investigation express a fear of retaliation, he will conduct monitoring for them as well.

CORRECTIVE ACTION REQUIRED: Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims. Provide the policy change and documentation of the change in policy and practice being communicated to all PREA Site Coordinators.

Corrective Action Completed: The Agency has updated policy D1-8.13 Offender Sexual Abuse and Harassment to now include third-party inmate reporters in face-

	<p>to-face monitoring meetings for 90 days, aligning with the existing monitoring requirements for inmate victims. Staff who report sexual abuse will undergo 90 days of monitoring and receive a flyer detailing how to report any retaliation to the Warden, PREA Hotline, CLEAR line, PREA Email, or the Office of Professional Standards email. Offenders or staff who cooperate in a sexual abuse investigation as witnesses and express concerns about retaliation will be evaluated and protected from retaliation. This policy revision and its implementation were communicated to the PREA site Coordinators (PCM) by the PREA Unit Manager (PREA Coordinator) on August 23, 2024, via email.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of the standard.</p>
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115.271	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she is immediately contacted by the facility when there is a clear sexual abuse allegation. If it is not clear, the Institutional Investigator will review the initial information and talk to the victim to gather more information to determine what type of incident occurred.</p> <p>Investigation File Review: There were no completed investigations of sexual abuse or sexual harassment during the review period.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators shall receive specialized PREA investigation training prior to conducting an investigation involving offender sexual abuse.” The PREA Unit Investigators conduct all of the sexual abuse investigations</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she has completed the NIC Sexual Abuse Investigations in a Confinement Setting, the NIC Advanced Sexual Abuse Investigations training and training by VAWA online.</p> <p>Document Review - NIC training certificates were provided for 12 investigators in the PREA Unit.</p> <p>c) PREA Unit Investigator Interview - The PREA Unit Investigator said she receives a Request For Investigation from the facility and the PREA Notification Checklist when there is a sexual abuse or sexual harassment allegation. The PREA</p>

Unit Investigators conduct the administrative and criminal investigations for sexual abuse and sexual harassment for SJCS. She reviews the initial information, reviews video evidence if available, conducts a background investigation of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident.

d) PREA Unit Investigator Interview – The PREA Unit Investigator said they do not conduct compelled interviews. If a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it certified mail to document the referral.

e) PREA Unit Investigator Interview – The PREA Unit Investigator said she is not allowed to subject the victim to a truth telling device. The subject of the investigation could be asked to complete a voice stress analysis. She determines the subject’s credibility on a case-by-case basis from the background review of prior criminal history, PREA investigations and conduct history.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall include an effort to determine whether staff member actions or failure to act contributed to the abuse.”

PREA Unit Investigator – The PREA Unit Investigator said she reviews staff actions in relation to the coordinated response plan, policies and procedures. This is documented in the administrative investigation report.

g) PREA Unit Investigator Interview – The investigator said she documents physical evidence collected, all interviews conducted, the review of video evidence and documentary evidence for criminal investigations.

h) PREA Unit Investigator Interview – The investigator said if a possible criminal violation is identified, she will contact the local prosecuting attorney for guidance and to write the Probable Cause Statement. She will send it certified mail to document the referral.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Inquiries regarding offender sexual abuse and harassment and all supporting documents shall be retained as long as the alleged perpetrator is incarcerated or employed with the department, plus 5 years and in accordance with the department procedure regarding records retention.”

j) PREA Unit Investigator Interview – The PREA Unit investigator said if the victim or the subject left the facility, she would do her best to contact staff via telephone with contact information from HR or contact the Parole Officer for the inmate to arrange a phone interview.

The facility meets the provisions of the standard based on the interviews, policies and documents reviewed.

115.272	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.” The facility reported no reports of sexual abuse or sexual harassment or completed investigations during the review period.</p> <p>Investigator Interview – The PREA Unit Investigator said preponderance of evidence is the evidence standard used for all administrative investigations by the Missouri DOC investigators. She said there must be more than 50% of the evidence supporting the alleged incident occurred as reported to be substantiated.</p> <p>The facility meets this standard based on the interview, policy and document reviewed.</p>

115.273	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon the completion of an offender sexual abuse investigation, the department’s PREA unit shall make written notification to the alleged victim regarding the outcome of the investigation utilizing the applicable PREA alleged sexual abuse by offender notification form or the PREA alleged sexual abuse by staff member notification form.” The facility reported no investigations or notifications being completed during the review period.</p> <p>Director Interview – The Regional Parole Supervisor/Unit Supervisor said when an investigation concludes, the PREA Unit Investigator will send a written notification of outcome to the facility PREA Site Coordinator. The PREA Site Coordinator will provide the notification to the resident.</p> <p>Investigator Interview – The PREA Unit Investigator said she fills out the written notification for the outcome of the investigation and sends it to the PREA Site Coordinator at SJCSC so it can be provided to the resident. There are two forms, one for incidents involving staff and one for incidents involving inmates or residents. She would complete the notification form and send it to the PREA Site Coordinator to provide to the resident.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All subsequent notifications shall be made when: Staff member on offender</p>

	<p>allegations: following the completion of the investigation, the offender shall be notified when the following occurs (unless the investigation is unfounded); The staff member perpetrator is no longer assigned to the housing unit; The staff member perpetrator is no longer employed by the department; The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution; A disposition of charges exists related to sexual abuse within the institution.”</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offender on offender allegations: following the completion of an investigation, the offender shall be notified when the following occurs: (1) The offender has been indicted on a charge related to sexual abuse within the institution. (2) A disposition of charges exists related to sexual abuse within the institution.” There were no completed investigations of sexual abuse committed by a resident on another resident during the review period.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA unit shall forward the written notification to the offender via the PREA site coordinator. The PREA site coordinator shall ensure that the written notification is provided to the offender in a confidential manner.”</p> <p>The facility meets the provisions of this standard based on the interviews, documents and policies reviewed.</p>
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115.276	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures.” The policy follows this provision.</p> <p>b-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Termination from the department shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse.” The policy follows this provision.</p> <p>The DA provided a memorandum stating no staff were disciplined for a violation of the sexual abuse and sexual harassment policy during the last 12 months.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All terminations for violations or the resignation of a staff member, who would have been terminated if not for their resignation, shall be reported to relevant licensing or accreditation bodies and law enforcement.” The policy follows this provision.</p>

	The facility meets the provisions of this standard based on the documents and policies reviewed.
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115.277	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies and law enforcement." The policy reflects the provisions of the standard.</p> <p>The DA provided a memorandum that states St Joseph CSC has not had any allegations of volunteers committing sexual abuse or sexual harassment this audit period. There were no investigations involving a volunteer. The facility does not have contract staff. Vendors come in briefly and are accompanied by staff at all times.</p> <p>Facility Director – The District Administrator said if a volunteer or contract staff were to be involved in an incident of sexual abuse or sexual harassment, she would temporarily suspend them pending the investigation outcome. If the investigation is substantiated, she would terminate their involvement with the facility. If the volunteer or contract staff had a professional license, she would refer the information to the Missouri Division of Professional Registration.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>

115.278	Disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be subject to corrective actions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender-on-offender sexual abuse in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard. The facility reported on the PAQ there were no resident on resident administrative or criminal findings of sexual abuse during the last 12 months.</p>

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Facility Director - The District Administrator said if a resident is found to have committed sexual abuse or sexual harassment, he would be disciplined in accordance with the severity of the offense and prior history of discipline.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The corrective action process shall consider whether an offender's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, shall be imposed in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Facility Director - The District Administrator said mitigating factors, such as cognitive disabilities, would be considered in determining sanctions. Sanctions could be loss of privileges or removal from the program.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "If found guilty of sexual abuse, the PREA site coordinator or designee shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."

Facility Director - The District Administrator provided a memorandum that said a resident that is determined to have committed sexual abuse will be discharged from the SJCSC program and would not receive therapy or counseling.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact."

f) Missouri DOC policy IS19-1.6 Offender Accountability Program states "a report of sexual misconduct, made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying." The policy reflects this provision of the standard.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department prohibits all sexual activity between offenders. Consensual sexual activity between offenders shall not be deemed sexual abuse and shall be addressed in accordance with divisional and institutional services procedures regarding offender accountability program." The policy reflects this provision of the standard.

Missouri DOC Probation and Parole policy P4-4.30 Documenting and Responding to

	<p>Violations of Facility Rules states under section C Violations of Sexual Misconduct General Information "If prohibited consensual sexual activity is identified, then facility staff may sanction clients for such activity and shall not be considered a Prison Rape Elimination Act."</p> <p>The facility meets the provisions of the standard based on the information from interviews and policies reviewed.</p>
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115.282	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims of sexual abuse shall receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional judgment."</p> <p>The District Administrator provided a memorandum that states resident victims are referred to the hospital or local medical providers for mental health and medical issues. We do not provide onsite services. The facility has an MOU with MOSAIC and the YWCA for services. There have been no incidents of sexual abuse during the last year.</p> <p>b) Staff Interviews – Staff said if a resident reports sexual abuse to them, they would separate the victim from the perpetrator and contact the DA. The supervisor on shift would call the hospital and they would help take the resident to the hospital if they were told to. Two shift supervisors were interviewed. Both said they have protocols that involve contacting the hospital and arranging for the victim to be transported.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate."</p> <p>Facility Director – The District Administrator said the emergency rooms would provide STI testing and treatment.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."</p> <p>The facility meets the provisions of this standard based on the information from</p>

	interviews and policies reviewed.
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115.283	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each victim and abuser shall be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals shall be completed for continued care following their transfer to, or placement in, other facilities or their release from custody.”</p> <p>The DA provided a memorandum that states resident victims are referred to the hospital or local medical providers for mental health and medical issues. We do not provide onsite services. The facility has an MOU with Mosaic Medical Center and the YWCA for services. There have been no incidents of sexual abuse during the last year.</p> <p>Facility Director Interview – The District Administrator said outside medical and mental health facilities, such as MOSAIC, would provide treatment, follow up care and referrals upon release.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims and abusers shall be provided with medical and mental health services consistent with the community level of care.”</p> <p>Facility Director – The District Administrator said all medical and mental health services are provided in the community at Mosaic Medical Center.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Facility Director – The District Administrator said Mosaic Medical Center or the Social Services Board would offer STI testing and treatment when necessary. The Social Services Board’s fees are income based and would be free to SJCSC residents.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p>

	<p>The DA provided information regarding the Sexual Assault Forensic Exam program through the Missouri Department of Public Safety that covers the costs for forensic exams for victims of sexual abuse.</p> <p>h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse."</p> <p>The DA provided a memorandum that states resident victims are referred to the hospital or local medical providers for mental health and medical issues. We do not provide onsite services. The facility has an MOU with Mosaic Medical Center and the YWCA for services.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.286	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded." The policy reflects this provision of the standard.</p> <p>Document Review - A memorandum from the District Administrator was provided that states SJCSC did not have any sexual abuse investigations during the review period and therefore had no sexual abuse incident reviews.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded." The policy reflects this provision of the standard.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The review team for offender sexual abuse events shall include the PREA site coordinator, and other upper level administrators, when applicable, with input from the shift supervisor, investigators, and medical or mental health practitioners." The policy reflects this provision of the standard.</p>

	<p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA sexual abuse incident debriefing report shall be completed by the PREA site coordinator outlining in detail the findings of the incident debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse incident debriefing form.” The form requires the review team to answer questions for the five factors in this standard.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The facility shall implement the recommendations for improvement, or shall document its reasons why recommendations shall not be implemented.” The policy reflects this provision of the standard.</p> <p>Facility Director – The District Administrator said the incident review team would consist of the her, the PREA Site Coordinator and PREA Unit Investigator. All evidence and the investigation report is reviewed. The staff response to the report, actions that may have contributed to the incident, staffing levels/monitoring, victim characteristics, perpetrator characteristics/history are all reviewed. Corrections are made if problems are identified that is facility specific. Corrections for agency level issues are recommended and sent to the PREA Unit.</p> <p>PREA Site Coordinator/Incident Review Team – The Unit Supervisor said there has not been a review of an incident during the last year due to not having a sexual abuse investigation. If they did have to do a review it would be him and the District Administrator, PREA Unit Investigator, shift supervisor on the review team. They will review all evidence, the investigation report and staff response. They would determine if there was a staffing issue, blind spot or other contributing factor.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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115.287	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Annual Site Report: Each facility shall utilize information from the offender sexual abuse incident debriefings to prepare an annual report to be submitted to the department’s PREA manager by the last working day in March.” The policy provides the definitions for sexual abuse and sexual harassment in section II. The definitions are equal to the definitions in the PREA standards.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions.”</p>

	<p>c) Missouri DOC Annual Report – The 2022 and 2021 MODOC PREA Annual Reports were reviewed. The reports provided a table of data broken down by incident type and outcomes. This data can be used to complete the Survey of Sexual Victimization summary report.</p> <p>d) PREA Coordinator Interview – The PREA Coordinator said all information and data from incidents of sexual abuse and sexual harassment are retained in the Investigative Reporting Intelligence System.</p> <p>f) PREA Coordinator Interview – The PREA Coordinator said he uses the data and incident information for substantiated investigations from the Investigative Reporting Intelligence System to complete the Survey of Sexual Victimization when it is requested.</p> <p>Document Review – the Survey of Sexual Victimization Summary was provided for 2021 and 2022. All incident types were reported for the Missouri DOC facilities.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>
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115.288	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions. a. The report shall include: (1) a comparison with prior year’s data, (2) corrective actions, and (3) an assessment of the department’s progress in addressing offender sexual abuse.”</p> <p>2021 & 2022 PREA Annual Report – The PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>Agency Head – The Division Director said incident data is used to assess and improve housing assignments, video monitoring and staffing levels. Additional training is provided to staff through PREA Unit staff speaking at basic training courses.</p> <p>PREA Coordinator – The PREA Coordinator said the annual report compares data since 2013 and summarizes ongoing corrective actions.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department’s annual PREA report shall be made available to the public on the department’s internet website.”</p>

	<p>Agency Head – The Division Director said the Director approves the report prior to posting it on the department’s website.</p> <p>Document Review – The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. Though the Agency Head Designee said the reports are reviewed and approved by the Director, the reports are not signed by the Director either electronically or by signature. It is recommended that the annual report be signed by the Director or designee each year.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The CAO or designee, PREA manager or department director shall edit specific material from the reports when publication would present clear and specific threat to the safety and security of a facility. The CAO or designee, PREA manager, or department director shall indicate the nature of the material edited.”</p> <p>PREA Coordinator – The PREA Coordinator said personally identifying or confidential information about incidents are not included in annual reports.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>
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115.289	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>PREA Coordinator – The PREA Coordinator said the PREA incident information is securely stored in the Investigative Reporting Intelligence System (IRIS). Access to IRIS is limited to investigators, PREA Site Coordinators, Warden’s and other staff directly involved in incident investigation and review.</p> <p>Missouri DOC Annual PREA Report - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The last two years of PREA Annual Reports were reviewed and found to have a comparison of sexual abuse data from 2013 to 2022. The reports did not contain any personal identifiers.</p> <p>The facility and agency meet this standard based on the information from the PREA Coordinator interview and review of annual reports found on the MODOC PREA webpage.</p>

115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>

	Auditor Discussion
	<p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. St Joseph Community Supervision Center was audited three years ago. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all of their facilities during all audit cycles.</p> <p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with residents in a private room.</p> <p>A notice of audit was sent on March 13, 2024 to be posted six weeks prior to the onsite audit. The notice was posted throughout the facility six weeks prior to the onsite audit, notifying residents they could send confidential correspondence to this auditor. Pictures of the notice posting were sent on March 15, 2024. No letters were received prior to the onsite audit from residents.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the Missouri DOC website PREA page found PREA audit reports for all MODOC facilities from 2014 to 2023.</p> <p>The agency has been posting all final audit reports on its website as required by this standard.</p>

Appendix: Provision Findings		
115.211 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.211 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities?	yes
115.212 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (c)	Contracting with other entities for the confinement of residents	
	If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in	na

	emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
115.213 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.213 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)	yes
115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing	yes

	staffing patterns?	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.215 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female residents?	no
115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enable residents to shower,	yes

	perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes
115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.215 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.216 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes

	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.216 (b)	Residents with disabilities and residents who are limited English proficient	

	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.216 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	yes
115.217 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of	yes

	force, or coercion, or if the victim did not consent or was unable to consent or refuse?	
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?	yes
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes
115.217 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.217 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
115.217 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.217	Hiring and promotion decisions	

(f)		
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.217 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.217 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.218 (a)	Upgrades to facilities and technology	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012 or since the last PREA audit, whichever is later.)	na
115.218 (b)	Upgrades to facilities and technology	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the	yes

	agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	
115.221 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	no

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.221 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.221 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.221 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.221 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).	yes

115.222 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.222 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).)	yes
115.231 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with	yes

	residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training,	yes

	does the agency provide refresher information on current sexual abuse and sexual harassment policies?	
115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes

	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	no
115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent	yes

	the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	
115.234 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a).)	yes
115.235 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	na

	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	na
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	na
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	na
115.235 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	na
115.235 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	na
	Do medical and mental health care practitioners contracted by	na

	and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	
115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.241 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:	yes

	Whether the resident's criminal history is exclusively nonviolent?	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes
115.241 (e)	Screening for risk of victimization and abusiveness	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes
115.241 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.241 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess a resident's risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?	yes
115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.241 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes

	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.242	Use of screening information	

(f)		
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.251 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.251 (b)	Resident reporting	

	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve	yes

	with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	
115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf	yes

	of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.252 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to	yes

	alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	
115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes
115.253 (b)	Resident access to outside confidential support services	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.253 (c)	Resident access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.254 (a)	Third party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.261 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

	information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.261 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.261 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.261 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.261 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.263 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.263 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.264 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate,	yes

	washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.264 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.265 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.266 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.267 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes

	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.267 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.267 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.271 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes
115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.271 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.271 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.271 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.271 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.271	Criminal and administrative agency investigations	

(h)		
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.271 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.271 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	na
115.272 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.273 (a)	Reporting to residents	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency	na

	request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
115.273 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform	yes

	the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.273 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.276 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.276 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.276 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.277 (a)	Corrective action for contractors and volunteers	

	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.277 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
115.278 (a)	Disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.278 (b)	Disciplinary sanctions for residents	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
115.278 (c)	Disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.278 (d)	Disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a	yes

	condition of access to programming and other benefits?	
115.278 (e)	Disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.278 (f)	Disciplinary sanctions for residents	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.282 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information	yes

	about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	
115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.283 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive	na

	information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	
115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.286 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.287 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287	Data collection	

(c)		
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.287 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.287 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.287 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.288 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.288 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.288 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.288 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.289 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes
115.289 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.289 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with residents?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the	yes

	same manner as if they were communicating with legal counsel?	
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes

PREA Facility Audit Report: Final

Name of Facility: Transition Center of Kansas City

Facility Type: Community Confinement

Date Interim Report Submitted: 08/02/2024

Date Final Report Submitted: 11/05/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 11/05/2024

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	06/13/2024
End Date of On-Site Audit:	06/14/2024

FACILITY INFORMATION	
Facility name:	Transition Center of Kansas City
Facility physical address:	651 Mulberry Street, Kansas City, Missouri - 64101
Facility mailing address:	651 Mulberry, Kansas City, MO 64101,

Primary Contact

Name:	Beth Johnson
Email Address:	Beth.Johnson@doc.mo.gov
Telephone Number:	8168427467

Facility Director	
Name:	Michelle Tippie
Email Address:	Michelle.Tippie@doc.mo.gov
Telephone Number:	816-512-1156

Facility PREA Compliance Manager	
Name:	Beth Johnson
Email Address:	Beth.Johnson@doc.mo.gov
Telephone Number:	

Facility Health Service Administrator On-Site	
Name:	Annette Hanway
Email Address:	Annette.Hanway@doc.mo.gov
Telephone Number:	816-512-1137

Facility Characteristics	
Designed facility capacity:	150
Current population of facility:	83
Average daily population for the past 12 months:	69
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males

Age range of population:	18 and over (current ages 20 - 73)
Facility security levels/resident custody levels:	Low
Number of staff currently employed at the facility who may have contact with residents:	88
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	8
Number of volunteers who have contact with residents, currently authorized to enter the facility:	18

AGENCY INFORMATION

Name of agency:	Missouri Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2729 Plaza Drive, Jefferson City, Missouri - 65109
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102
Telephone number:	5737512389

Agency Chief Executive Officer Information:

Name:	Trevor Foley
Email Address:	Trevor.Foley@doc.mo.gov
Telephone Number:	573-526-6607

Agency-Wide PREA Coordinator Information

Name:	Darren Snellen	Email Address:	darren.snellen@doc.mo.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

41

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-06-13
2. End date of the onsite portion of the audit:	2024-06-14

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Metropolitan Organization to Counter Sexual Assault Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	150
15. Average daily population for the past 12 months:	69
16. Number of inmate/resident/detainee housing units:	5
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	86
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	2
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	2
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	2
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	2
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	5

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	1
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	19
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	86
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	18

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	8
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	8
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<div> <input type="checkbox"/> Age </div> <div> <input type="checkbox"/> Race </div> <div> <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Transition Center of Kansas City is a work release program. The inmates that were on center during the audit were randomly selected based on housing unit to ensure inmates from each housing unit were represented.

56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	8
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1

62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	1
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported no residents that were limited English proficient being at the facility during the onsite audit.
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2

66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The three residents that reported sexual abuse during the review period had been released.prior to the onsite audit.
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	3
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility does not have a segregation unit because it is a community confinement facility.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No

74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Ten security staff and two non-security staff were interviewed from all three shifts.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	11
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☐ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☒ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☐ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☐ First responders, both security and non-security staff
- ☒ Intake staff

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	Specialized staff interviews were conducted Webex the week before the onsite audit.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?

☒ Yes

☐ No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes

☐ No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

☒ Yes

☐ No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

88. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="checked" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Resident documents (risk assessments, PREA education) were requested for seventeen residents from the resident list. Risk assessments and PREA education were also provided for all residents interviewed. The staff documents (criminal background checks, employment background checks, training) were requested on twelve staff hired in the last year and eight veteran staff. Criminal background checks and training documents were requested for ten contract staff. Three volunteers were chosen from the volunteer list for PREA training completion document review.
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY	
Sexual Abuse and Sexual Harassment Allegations and Investigations Overview	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	1	0	1	0
Total	1	0	1	0

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	2	1
Total	0	0	2	1

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:

3

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	3
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	There were no allegations of sexual harassment during the review period.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- ☒ The audited facility or its parent agency
- ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- ☐ A third-party auditing entity (e.g., accreditation body, consulting firm)
- ☐ Other

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment is the policy that provides the zero-tolerance policy, definitions of sexual abuse and sexual harassment, and the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>b) Based on the organization charts provided, the Missouri Department of Corrections has a PREA Coordinator in the Office of Professional Standards that reports to the Director of that division. The Director of OPS then reports to the MODOC Director.</p> <p>PREA Coordinator Interview – The PREA Coordinator said he has sufficient time and authority to fulfill the duties of the PREA Coordinator for the agency. He oversees the PREA Unit that consists of dedicated investigators and support staff that assist him in managing and monitoring PREA standards compliance and PREA investigation at all facilities in the agency. Each facility has a PREA Compliance Manager that reports to him for PREA Compliance matters.</p>

	<p>PREA Compliance Manager – The Associate Superintendent said she is designated as the PREA Site Coordinator (PCM) at TCKC. She reports to the Superintendent for TCKC. She is responsible for all PREA Compliance at TCKC and indirectly reports to the PREA Unit Manager, who is the PREA Coordinator for the MDOC. She said she has the time to oversee the PREA compliance.</p> <p>Facility organizational chart was provided showing the AS/PREA Site Coordinator reports directly to the Superintendent.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.212	Contracting with other entities for the confinement of residents
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>It was reported on the PAQ that the Missouri Department of Corrections currently does not contract for the confinement of inmates with a private or other governmental agency. The PREA Coordinator stated in his interview the Missouri DOC is not contracting with anyone for confinement of inmates at this time. The Superintendent said the Transition Center of Kansas City does not contract for the confinement of inmates. The facility reported on the PAQ there were no contracts for confinement entered into or renewed.</p>

115.213	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires each facility to “maintain staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse.” “The staffing plan shall consider the facility’s physical plant to include but not limited to blind spots or areas where staff members or offenders may be isolated, the composition of the offender population, and the prevalence of substantiated and unsubstantiated offender sexual abuse allegations.”</p> <p>Staffing Plan Document – The facility provided a document that was titled Staffing Grid. The document contained a breakdown by shift of the security posts allotted for the shift with days off. There was no mention of the other staff at the facility such as administrative or program staff that may be involved in monitoring residents. The plan did not consider the layout of the facility, the security level of</p>

residence or the prevalence of PREA incidents. There was also a security camera locations list provided. The facility reported on the PAQ an average population since the last PREA audit of 69 and the staffing plan being predicated on 150 residents.

Facility Director – The Superintendent said she reviews vacancies on a regular basis with the AS/PREA Site Coordinator, Major, AS and HR. The facility has a minimum of number of staff per shift. Overtime is used to cover staff shortages due to call-ins to maintain the staff minimum. The facility has not fallen below the staff minimum in the last year. If there are any deviations from the staffing plan, they will be documented on the shift summary. The Associate Superintendent reviews the shift reports weekly for deviations.

Tour Observations – The facility was toured the first day of the onsite audit. The agency PREA Unit Manager and facility Associate Superintendent led the tour. Every area of the facility was observed. Very few residents were in the facility at the time of the tour due to being at work in the community. Staff were observed conducting rounds of the housing units and other areas that residents have access to. There were no areas that would be considered a blind spot or prohibit staff supervision. Cameras covered resident housing units including sleeping rooms. Cameras were in recreation, food service, dining room, maintenance, and other areas residents have access. There were 218 cameras in total.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall comply with the staffing plan on a regular basis, deviations from the staffing plan shall be documented and justification for deviations noted.”

A memorandum was provided by the Superintendent that states TCKC has not fallen below the minimum staffing pattern. There were no deviations found on the shift summaries that were reviewed.

Facility Director - The Superintendent said the facility has a minimum number of staff per shift. Overtime is used to cover staff shortages due to call-ins to maintain the staff minimum. The facility has not fallen below the staff minimum in the last year. If there are any deviations from the staffing plan, they will contact her and document on the shift summary. The Associate Superintendent reviews the shift reports weekly for deviations.

PREA Site Coordinator – The Associate Superintendent said the facility has a mandatory minimum of security staff per shift. She said the facility has not dropped below the staff minimum during the review period. She reviews the shift reports daily to monitor deviations.

c) The 2023 TCKC PREA Annual Report was provided as the review of the annual review of the staff plan. The report does discuss an evaluation of the camera and monitoring systems and a section for staffing plan evaluation. The staffing plan evaluation section does discuss the method for monitoring staffing levels and provides the security staff needed to cover each shift. It does not mention the non-custody staff therefore it is not reviewing the staffing overall.

	<p>CORRECTIVE ACTION REQUIRED: The facility must provide documentation of a complete staffing plan and review the plan based on the requirements of the standard during the review period.</p> <p>Corrective Action Completed: The staffing plan was presented on the Staffing Grid, TCKC Vacancy Report and TCKC Security Camera Locations document. The review of the staffing plan was completed and documented in a Facility Staffing Plan Review document that was completed and signed by the Superintendent, Associate Superintendent PREA Site Coordinator (PCM), Chief of Custody and sent to the Northeast Regional Administrator and PREA Unit Manager (PREA Coordinator) for MODOC for review. The review covered thirteen factors that are required in substandard (a) and (c). The facility meets the provisions of this standard based on the policies, documents, interviews and corrections completed.</p> <p>Based on the interviews, documents and policies reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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115.215	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri Department of Corrections policy IS20-1.3 Searches prohibits cross gender strip searches except in exigent circumstances. Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment also prohibits cross-gender strip searches except in exigent circumstances. The facility reported on the PAQ that no cross-gender strip searches occurred in in the past 12 months. The policies reflect the requirements of the provision for this standard.</p> <p>Document Review -The Superintendent provided a memorandum through the PAQ that says TCKC did not conduct a cross-gender strip searches during the review period. Zero cross gender strip or body cavity searches were reported on the PAQ.</p> <p>Random Staff Interviews – All female staff said they have been trained how to conduct pat-down searches of the male residents in a cross-gender manner. All staff said they have been trained how to conduct cross gender and transgender pat searches.</p> <p>Resident Interviews – Some residents said they have been pat searched by female staff during the time they have been at TCKC. They said the search was appropriate, professional and not too invasive. There was one resident that identified as transgender but did not want to tell staff or be searched in a different manner than other male residents.</p> <p>c) Missouri DOC policy IS20-1.3 Searches requires staff to document all cross-gender strip searches on the cross-gender search form. There was no cross-gender</p>

strip search forms presented for review. The policy reflects the requirements for this provision of the standard.

Document Review -The Superintendent provided a memorandum through the PAQ that says TCKC has not had a cross-gender strip search during the review period.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders shall be allowed to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks in accordance with, institutional services, and probation and parole procedures regarding searches." The policy also requires staff of the opposite gender to announce their presence prior to entering a housing unit. These announcements are to be logged in the housing unit chronological log. The policy reflects the requirements for this provision of the standard.

Tour Observations - TCKC has three housing units with showers and toilets in one bathroom in each unit. All toilets were covered with stall walls with doors. There was an initial set of saloon doors going into the bathroom. The stall showers all had shower curtains that were hung off the floor enough to see feet and a clear panel at shoulder height. Toilets had cinder block stall walls that provided a modesty screen but not a blind spot. Opposite gender staff announcements were observed during the tour. Opposite gender staff announcements were documented in the housing unit log as "PREA Announcements." A sign indicating female staff on duty is hung up at the entrance to the housing unit entrance for hearing impaired inmates.

Random Staff Interviews - Twelve staff were selected at random from shift rosters for interviews. All staff said they felt like the residents could shower and use toilet facilities with enough privacy that female staff could not see their genitals or buttocks. All staff were aware of and hear opposite gender staff make announcements when entering housing units. Female staff said they make an announcement prior to entering the housing areas and bathrooms.

Document Review - Housing unit logs were requested for random dates in every month from January to April of 2024. PREA announcements were found logged multiple times on each shift when female staff entered the housing unit. Shifts with all male staff working documented security rounds with no announcements documented. Unannounced rounds were also documented on each shift though they are not required for community confinement standards.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall not perform strip or pat-down searches or conduct a physical examination for the sole purpose of determining an offender's genital status in accordance with the institutional services procedures regarding searches, diagnostic center reception and orientation, and receiving screening intake center." Missouri DOC policy IS20-1.3 Searches prohibits staff from performing a strip search for the sole purpose of determining an inmate's gender. The policies reflect the requirements of the provision of this standard. There was one resident that identified as transgender but did not want to tell staff or be searched in a different

	<p>manner than other male residents.</p> <p>Random Staff Interviews – All staff said strip searching a transgender resident solely for determining their genital status was prohibited by policy, not allowed and would be unprofessional.</p> <p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Custody staff members shall be trained in how to conduct cross gender pat down searches of transgender and intersex offenders in a professional and respectful manner and in the least intrusive manner possible as consistent with security needs.” The policy reflects the requirements for this provision of the standard.</p> <p>Random Staff Interviews – The staff said they had been trained how to do cross gender searches and searches of transgender inmates in the search training provided at the academy. The female staff said they have conducted pat searches of male residents based on the cross-gender search training.</p> <p>Resident Interviews – Male residents said they have been pat-searched by female staff. The searches were appropriate and not too invasive. None said they had been subjected to a cross-gender strip search.</p> <p>Document Review – Documentation of search training was provided for fifteen security staff.</p> <p>The facility meets the provisions of this standard based on the above information from interviews, tour observations, documents and policies reviewed.</p>
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115.216	Residents with disabilities and residents who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires staff to “provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders.” LEP residents will be provided the PREA video transcript and PREA brochure in their native language. If these cannot be translated into their native language, the PREA site coordinator will utilize an interpreter to assist the resident in understanding the material. “Offender interpreters shall not be utilized except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first responder duties, or the investigation.”</p>

	<p>The facility provided a large print version of the MDOC Offender Sexual Abuse and Harassment (PREA) Brochure for visually impaired residents, the printed transcript of the PREA video for hearing impaired residents, and a braille version of the PREA brochure. The PREA posters and were observed on the tour in both English and Spanish. The posters were placed in a location that could be easily read. The PREA brochure was also provided in seven different languages. The Superintendent also provided a memorandum stating resident interpreters have not been used during the review period.</p> <p>Staff Interviews – All Staff said they were aware of an interpretive service that a supervisor can access if needed for an LEP resident. All staff said using another resident to translate is prohibited.</p> <p>There were no limited English proficient residents to interview during the onsite audit.</p> <p>Agency Head – The Assistant Director said the MODOC makes every effort to provide accommodations for inmates and residents that have disabilities or are limited English proficient.</p> <p>Document Review – The facility provided a Missouri statewide contract for on-demand interpretive services and sign language services. The interpretive services contract provides access to three companies that can provide over-the-phone interpretive services for LEP people. The contract expires November 2024.</p> <p>PREA Site Coordinator Interview – The Associate Superintendent said the state has a contract that provides on demand interpretive services. The services have not been used in the last year due to not having any LEP residents. An administrative staff can set up access to the service when needed.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>
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115.217	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall not hire or promote any person, staff member, or enlist the services of any contractor that may have contact with an offender when it is known that he: a. has engaged in sexual abuse with an offender in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse; or c. has been civilly or</p>

administratively adjudicated to have engaged in sexual activity by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse.”

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall consider any incidents of sexual harassment in determining whether to hire or promote any person or enlist the services of any contractor who may have contact with offenders in accordance with the department's procedures regarding background screening, candidate selection, maintenance of employee records, employee discipline, and labor organizations.”

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before hiring new staff members a worksite personnel staff member or designee shall: a. perform a criminal background records check; and b. attempt to contact all prior institutional employers, for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse in accordance with the department procedure regarding background screening.”

HR Staff Interview - HR staff said criminal background checks and pre-employment background checks are completed for all new hires and promotions. She reviews prior discipline issues that would include sexual harassment. Issues with sexual harassment history would be considered in hiring and promotion decisions. If applicants have prior corrections experience, a designated staff calls the prior employer for a pre-employment PREA check to inquire about substantiated sexual abuse investigations or resignations during a sexual abuse investigation.

Document Review - Criminal background checks for twelve staff hired in the last 12 months were provided for review. All twelve were completed before the hire date. Six of the staff hired had marked yes for prior institutional work experience and the PREA employment check was completed and signed by the staff making the check.

d) Missouri DOC policy D2-2.2 Background Investigations states “Contract staff members, volunteers, and student interns shall have a background investigation conducted that consists of the criminal history check and any violations that have been reported to pertinent professional licensing and/or certification organizations if applicable.”

Document Review - Criminal background checks were requested and provided for two food service contract staff that started in the last 12 months. The reports were conducted prior to their start date as required.

e) Missouri DOC policy D2-11.14 Annual Employment Requirements Section III. A requires an annual criminal background check to be completed on the birth month of every employee.

Human Resource Staff Interview - HR staff said she requests a criminal background check be completed on staff annually during their birth month.

	<p>Document Review – Criminal background checks were provided for fourteen veteran staff and four veteran medical contract staff. The criminal background checks were all conducted less than two years ago.</p> <p>f) Human Resource Staff Interview – HR staff said new hire staff and staff applying for promotions are asked questions about (a) 1-3 of this standard on applications for employment. Staff are not required to complete a self-evaluation annually and are not asked these questions again. Contract staff are asked the required questions on an Application for Facility Access form or a PREA-Contracted Staff form.</p> <p>Document Review – Documentation of questions pertaining to (a) 1-3 were provided for the staff hired at TCKC in the last year.</p> <p>g) Missouri DOC policy D2-2.2 Background Investigations states “False information regarding substantiated allegations of offender or resident abuse and/or harassment on the employment application shall be grounds for termination.”</p> <p>h) Human Resource Staff Interview – HR staff said if another correctional institution contacts the Missouri DOC to inquire about substantiated allegations of sexual abuse or resignations during investigations of a former employee, they will provide information on the substantiated sexual abuse or resignations.</p> <p>The PREA Coordinator for MODOC provided four examples of PREA information being released upon request to other corrections agencies during the last 12 months.</p> <p>The facility meets the provisions of this standard based on the information from interviews, policies and documents reviewed.</p>
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115.218	Upgrades to facilities and technology
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) The facility reported on the Pre-Audit Questionnaire and provided a memorandum that states the HVAC system is being upgraded.</p> <p>Agency Head Interview – The Director said the agency designs expansion and modifications to maximize the agency’s ability to protect inmates.</p> <p>Director Interview – The Superintendent said there have been no expansion or modifications since the last PREA audit. If there are any, improving inmate monitoring based on the requirements of the PREA standards would be considered in the design.</p> <p>b) A memorandum was provided through the Pre-Audit Questionnaire that states two cameras were replaced during the audit period.</p>

	<p>Director Interview – The Superintendent said two cameras were replaced on the video monitoring system but there have been no major upgrades or expansions of the system. Any changes to the cameras would be done based on PREA compliance.</p> <p>The facility meets this standard based on the information from interviews and documents reviewed.</p>
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115.221	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” The policy also instructs staff to take steps to protect evidence. This may include instructing the victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom. If possible, staff should not allow the inmate perpetrator to destroy evidence by preventing showering, changing clothes, eating, drinking, or using the bathroom.</p> <p>The Superintendent provided a memorandum through the PAQ that states all investigations are conducted through the PREA Unit Investigators in central office.</p> <p>Staff Interviews - If a resident reports a sexual assault, all staff said they would ask the resident victim not to shower, change clothes, brush teeth, eat, drink, or use the bathroom until the inmate gets a forensic exam or they are relieved. Staff would ensure the alleged resident perpetrator would not destroy evidence in the same way. All said they would protect evidence at the scene until it could be collected by investigators.</p> <p>b) MODOC policy D1-8.13 provides a time frame of 72 hours for possible collection of forensic evidence the same as found in the National Protocol for Sexual Assault Medical Forensic Examinations.</p> <p>The MODOC PREA Coordinator provided a memorandum stating the PREA Unit Investigators use evidence collection protocols discussed in “A National Protocol for Sexual Assault Medical Forensic Examinations.”</p> <p>c) MODOC policy D1-8.13 requires the facility health services staff to contact the on-call SANE staff member if the alleged incident occurred within 72 hours. The policy states “The SANE staff member shall collect evidence according to established forensic procedures for processing and document the exam and finding in the applicable department computer system.” “If the alleged perpetrator is a staff member, the victim shall be transported to the community emergency room</p>

	<p>for a sexual assault examination to be performed by a SANE or SAFE.”</p> <p>PREA Compliance Manager Interview – The Associate Superintendent/PREA Site Coordinator said because TCKC does not have an area for a forensic examination to be performed by a MODOC SANE, the resident would be taken to Mosaic Medical Center if a forensic exam were needed. The exam would be no cost to a resident.</p> <p>TCKC Superintendent provided a memorandum that stated TCKC had no forensic examination during the review period.</p> <p>Document Review – A copy of Missouri statute 191.0225 was provided for review. The statute requires all medical provider charges for forensic examinations to be billed to and paid by the Missouri Department of Health and Senior Services. No medical provider can charge a victim for the forensic exam.</p> <p>d-e, h) The facility provided a letter of agreement with the Metropolitan Organization to Counter Sexual Assault for victim advocate services at forensic examinations at University Hospital for residents of TCKC. The memorandum was signed in May of 2024</p> <p>Victim Advocate Interview – A victim advocate from the MOCASA was called to verify the letter of agreement with TCKC. The MOCASA staff said they would provide VA services to residents at the hospital for a forensic examination. The hospital would contact them when services are needed. They can provide follow-up services after the exam.</p> <p>Staff Victim Advocate Interview – The qualified victim advocate staff said he completed the MOCASA training online in 2017. The training covered the forensic examination process and was trauma centered. He said he can provide victim advocate services for a resident at the investigator interview. He said the hospital has a local victim advocate organization they use for the forensic examinations.</p> <p>Document Review – Documentation was provided for completion of victim advocate training by two designated staff.</p> <p>The facility meets the provisions of this standard based on the information above from interviews, policies and documents reviewed.</p>
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115.222	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p>

	<p>Agency Head – The Assistant Director said allegations of are investigated utilizing the PREA Unit or Institutional Investigators. Institutional Investigators investigate allegations of Sexual Harassment and the PREA Unit investigates allegations of Sexual Abuse. These investigations include both administrative and criminal investigations. This includes anonymous and third party allegations.</p> <p>PREA Coordinator Interview – The PREA Unit Manager said in the even of an allegation of sexual assault by a resident, the facility may call local law enforcement for the initial response but the investigation will be completed by the PREA Unit investigators.</p> <p>Facility Head Interview – The Superintendent said all sexual abuse and sexual harassment allegations are forwarded immediately to the PREA Unit in central office for investigation. TCKC does not have an institutional investigator. A Request for Investigation form will be completed and sent to the PREA Unit to initiate the investigation.</p> <p>Investigation File Review – There were three allegations of sexual abuse investigated by PREA Unit Investigators during the review period. A request for investigation was sent to the PREA Unit from the facility requesting an investigation of the allegations in all three cases.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.” This policy was found posted on the Prison Rape Elimination Act page of the Missouri DOC website at https://doc.mo.gov/programs/PREA. Policy D1-8.4 Institutional Investigations covers requirements for investigations in general. The policy is identified as confidential, therefore it cannot be posted on the MODOC website.</p> <p>Investigator Interview – The PREA Unit Investigator said all sexual abuse and sexual harassment allegations received at TCKC are sent to the PREA unit in a Request for Investigation form that would be completed and sent by the PREA Site Coordinator.</p> <p>The facility meets the provisions of the standard based on the information from interviews, policies and documents reviewed.</p>
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115.231	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All staff members shall receive initial PREA training during the department's basic training.”</p>

PREA Basic Training Curriculum – The PREA Basic training curriculum was provided for review. It covers the zero-tolerance policy of MODOC; staff responsibilities in prevention, detection, reporting and response procedures; inmate’s rights to be free of sexual abuse, sexual harassment and retaliation; staff rights to be free from retaliation; dynamics of sexual abuse; reactions of victims; how to detect signs of sexual abuse; avoiding inappropriate relationships with inmates; and mandatory reporting laws. The curriculum did not cover professional communication with LGBTI inmates. However, The Professional Boundaries lesson plan was provided for review that provides staff information on how to communicate effectively and professionally with LGBTI inmates. This training is all provided at the Basic Academy in pre-service training for new hires.

Random Staff Interviews – Twelve random staff said the training covered zero tolerance policy; rights of residents and staff; dynamics of sexual abuse, signs and reactions of sexual abuse victims, how to avoid inappropriate relationships with residents, how to respond to a report of sexual abuse, how to protect evidence, and professional communication with LGBTI residents. They could describe the information provided for these topics. All staff said they completed the Basic PREA Training when they were hired and the PREA Refresher Training every two years. In the years between refresher training, they receive monthly emails with information about PREA and their responsibilities in prevention, detection, and response.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members shall receive additional training if they are reassigned from a facility that houses only female offenders to a facility that houses only male offenders if their basic training or institutional basic training occurred more than two years prior to the time of assignment.”

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All staff members shall complete refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. Years in which an employee is not required to complete training, the facility site coordinator shall provide refresher information on current sexual abuse and sexual harassment policies.”

The Superintendent provided a memorandum that states staff are provided with refresher information between trainings via email from the PREA Unit Manager.

PREA Coordinator Interview – The PREA Unit Manager said he sends out emails to all facilities once a month that provides refresher information from the PREA training.

Document review – PREA refresher information slides and emails were provided for April and May 2024 in the OAS.

PREA Refresher #1-12 training curriculum – After the PREA Basic is completed at academy, staff are required to complete a PREA Refresher training modules every two years. These modules were reviewed and found they cover the required topics (a) 1-9. The refresher training was revised to include #10 topic regarding mandatory reporting for victims under 18 and vulnerable adults to outside agencies.

	<p>The email with the update to the curriculum forwarded to all staff and contractors in May 2024 as a corrective action.</p> <p>Staff Interviews – veteran staff said they complete a PREA Refresher training every 2 years and receive emails monthly between bi-annual training that provide information about PREA. Staff hired in the last year said they have received emails since completing the PREA Basic. All staff said the training covered zero tolerance policy; rights of residents and staff; dynamics of sexual abuse, signs and reactions of sexual abuse victims, how to avoid inappropriate relationships with residents, how to respond to a report of sexual abuse, how to protect evidence, and professional communication with LGBTI residents. They could describe the information provided for these topics. Staff said they saw an update regarding mandatory reporting for vulnerable adults in an email.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All completed PREA training requires a PREA acknowledgment form or PREA basic training acknowledgment form stating the staff member understood and completed the training. This form must be routed through the facility training officer or regional training coordinator.”</p> <p>Document Review – Records of PREA training completion were requested for twelve staff that were hired in the last year and fifteen veteran staff. Training completion documents were provided for all twelve newly hired staff. The training was completed during the first week after their hire date. Training completion documents for fifteen veteran staff were provided with all being completed within the last two years.</p> <p>The facility meets the standard based on the interviews, policies and documents reviewed.</p>
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115.232	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All part-time employees, volunteers, and contract staff members shall receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training.”</p> <p>Training Curriculum – The PREA training curriculum for volunteers and contractors was provided for review. The curriculum provides volunteer and contract staff with the MODOC zero-tolerance policy, rights of inmates, signs of sexual abuse, MODOC’s response process, dynamics of sexual abuse, reactions of victims, and how to respond to a report of sexual abuse.</p>

	<p>Volunteer Interview - A volunteer said he has completed the PREA training every. He said the training covered the zero-tolerance policy, rights of residents to be free from retaliation, sexual abuse and sexual harassment, what his responsibilities are if a resident reports sexual abuse or sexual harassment to him. He said he is required to report any knowledge or suspicion of sexual abuse or sexual harassment. He is required to notify security staff and the shift supervisor immediately.</p> <p>Contract Staff Interview - A contract staff that works in foodservice was interviewed. She said she has completed the PREA training. The training covered the zero-tolerance policy, detection and response to a report of sexual abuse or sexual harassment. She said she must immediately notify the shift supervisor of any information she is told about an incident of sexual abuse or sexual harassment. The training also covers what her responsibility is in protecting evidence.</p> <p>c) Document Review - Documentation of PREA training completion was requested for eight contract staff and a volunteer. Documentation of PREA training completion was provided for the eight contract staff and volunteer.</p> <p>The facility meets the provisions of this standard based on the information above from interviews, policies and documents reviewed.</p>
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115.233	Resident education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department shall provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills in accordance with the department's procedures regarding deaf and hard of hearing offenders, disabled offenders, and blind and visually impaired offenders." The policy requires the facility to have the PREA offender brochure in several recognized languages. If the brochure is not available in the inmate's language then an interpretive service will be utilized to provide the information. The PREA offender brochure was provided in seven additional languages. The policy also requires the facility to make PREA reporting information available or visible to all inmates through posters, the offender rulebook, and the brochure. Policy requires the inmates to sign an acknowledgement receipt for viewing the video and receiving the PREA offender brochure.</p> <p>Tour Observations - A PREA education was not observed during the onsite audit as there were no new residents received. The area the education is provided in a classroom. Staff described the process and how the information is provided to residents. Information regarding victim services, reporting sexual abuse and sexual harassment was posted in the resident living areas, on the wall by the telephones,</p>

	<p>in the resident dayrooms and at the entrance to the facility. The information was in both English and Spanish and was placed where it could easily be read by residents.</p> <p>Intake Staff Interview – The staff that provide the PREA education said she provides the PREA brochure, shows a PREA information video and verbally covers, zero tolerance policy, how residents can report sexual abuse and sexual harassment, resident’s rights, and anonymous reports to an outside agency on the first day the residents arrive. She also provides information about victim advocate services.</p> <p>PREA Education is provided to all new residents regardless of transferring from another MODOC community supervision facility. If a resident has cognitive disabilities or can’t read, she will read over the information with the resident individually to ensure they understand the information. An interpretive service or bilingual staff can be used to assist limited English proficient residents</p> <p>Resident Interviews – Ten residents were interviewed. All said they were provided the brochure and video the first day of arrival and staff covered the information with them in a group. Zero-tolerance policy, resident rights, victim services, and how to report sexual abuse and sexual harassment were covered during the orientation. All residents said they see the PREA information posters in the facility as well.</p> <p>Document Review – The Offender Sexual Abuse and Harassment Acknowledgement forms were provided for review for thirty-three residents. PREA education was provided on the first day of arrival at the facility.</p> <p>The facility meets the provisions of this standard based on the information above from interviews, policies and documents reviewed.</p>
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115.234	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators assigned to investigate offender sexual abuse allegations shall receive specialized PREA investigator training.” The policy reflects the provision’s requirement.</p> <p>Training Curriculum – The NIC PREA: Investigating Sexual Abuse in a Confinement Setting was reviewed by this auditor. The training covers the investigation standards, Miranda, Garrity, evidence collection, forensic examinations, interviewing techniques, understanding the victim, and evidence requirements for substantiating administrative cases or for making a prosecutorial referral. The curriculum covered the requirements of the standard.</p> <p>Investigator Interview – The PREA Unit Investigator said she completed the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting and the</p>

	<p>advanced NIC investigations course. She also has completed sexual abuse investigation training through VAWA as well. She said the PREA Unit investigates all sexual abuse and sexual harassment cases for TCKC.</p> <p>Document Review – The NIC PREA Investigations training certificates were provided for the thirteen PREA Unit Investigators.</p> <p>The facility meets this standard based on the interviews, policy and documents reviewed.</p>
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115.235	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Health services staff members shall receive specialized PREA medical and mental health training.”</p> <p>Specialized Medical Training Curriculum – The Centurian PREA Overview training curriculum was provided for review. The curriculum is the medical contractor’s specialized medical training that all medical and mental health staff complete. The curriculum comes from Relias training. The training curriculum provides information about what is sexual abuse and sexual harassment; how to detect and assess sexual abuse and sexual harassment; preserving physical evidence; how to respond and communicate with victims; how medical and mental health staff are to report any knowledge or suspicion of sexual abuse and sexual harassment. The training curriculum covers the requirements of this provision of the standard.</p> <p>b) A memorandum from the Superintendent states TCKC contract medical staff do not conduct forensic medical examinations. Residents would be taken to the University Health Hospital for a forensic examination.</p> <p>c) Medical Staff Interview – Medical staff said she has completed specialized medical training through Centurian. She said all medical staff complete annual PREA medical training. The specialized medical training covers how to detect and assess signs of sexual abuse and sexual harassment, what medical staff can do to preserve physical evidence, responding to victims, and who to report allegations or suspicions to. She said she has also completed the PREA training for contract staff as well.</p> <p>Mental Health Staff Interview – The mental health staff said she receives specialized medical training through Centurian annually and has completed the PREA training for contract staff. The training covered protection of evidence, signs of sexual abuse, communication with victims, and reporting sexual abuse and sexual harassment.</p>

	<p>Document Review – Documentation of specialized medical training was requested for seven medical and mental health contract staff. All seven had completed the Relias PREA Overview training that provides the required topics as mentioned in the training curriculum review.</p> <p>d) The facility provided documentation of MODOC PREA training completion for seven medical and mental health contract staff.</p> <p>The facility meets this standard based on the interviews, policy and documents reviewed.</p>
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115.241	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All offenders shall be assessed during intake and upon transfer to another facility for their risk of being sexually abused by other offenders or sexual abusiveness towards other offenders in accordance with the institutional services procedure regarding offender housing assignments, transgender and intersex offenders and the probation and parole procedures regarding housing assignments, transgender and intersex clients, and contracted residential facilities.” The policy requires an assessment for risk of victimization and abusiveness.</p> <p>Risk Screening Staff Interviews – The staff that completes the initial risk screening assessment said she meets with residents individually on the first day they arrive to complete the initial risk screening. She asks the residents questions about prior victimization, sexual orientation, gender identity, disabilities, prior perpetration of sexual abuse, criminal history, conduct history, and if the resident fears sexual victimization. She uses the resident record to obtain additional information about criminal history, conduct history, size, age, and documented disabilities. The assessment is completed within 72 hours of the resident arrival at TCKC, usually on the first day.</p> <p>Resident Interviews – All of the residents could recall being asked questions on the first day at the facility about prior victimization; identifying as gay, bisexual, transgender, or intersex; disabilities, and feelings of vulnerability to sexual abuse.</p> <p>b) Missouri DOC policy IS5-2.3 Offender Internal Classification states “CCMs will conduct a new internal classification within the first 72 hours at that facility and the offender will be housed in accordance with the new internal classification score.” The policy requires a new risk assessment to be completed within 72 hours of arrival at the facility.</p> <p>Document Review – The Initial Risk Assessments for thirty-three residents were</p>

reviewed. All initial assessments were completed the first day of arrival at TCKC.

c) Missouri DOC policy IS5-2.3 Offender Internal Classification states “Facilities shall assess offenders for the risk of being sexually abused and the risk of being sexually abusive utilizing their divisional adult internal risk assessment in accordance with the institutional services procedure regarding diagnostic center reception and orientation, and probation and parole procedures regarding the community supervision center, the community release center, and contracted residential facilities.” The risk assessment was provided for review. The factors in the assessment were found to be objective.

d) Risk Screening Staff Interview – The staff that completes the initial risk screening assessment said she meets with residents individually on the first day they arrive to complete the initial risk screening. She asks the residents questions about prior victimization, sexual orientation, gender identity, disabilities, prior perpetration of sexual abuse, and if the resident fears victimization. She uses the resident record to obtain additional information about criminal history, conduct history size, age, and documented disabilities.

Document Review – A Risk of Victimization and Abusiveness Screening Tool was reviewed and found to assess risk of victimization for the following factors: disabilities; age; resident physical stature; prior incarceration; prior conviction for sex offense with a Child or Adult victim; nonviolent history; homosexual or bisexual, gender non-conforming that provided the example of transgender or intersex identity; prior victim of sexual abuse; and perception of vulnerability to being sexually assaulted. Inmates are not detained solely for civil immigration in the MODOC. The screening tool does not clearly assess for the resident identifying as or perceived to be transgender or intersex. Using the word homosexual is not clearly instructing staff to assess for is or perceived to be gay or lesbian. The screening tool does not meet this provision of the standard.

e) Risk Screening Staff Interview – The staff that complete the initial assessment said she asks the resident questions and reviews the record for sex offense convictions, violent offense convictions, and prior conduct for violence or sexual abuse.

Document Review - The Risk of Victimization and Abusiveness Screening Tool was reviewed and found to assess risk of abusiveness for the following factors: Committed sexual assault, molestation or rape at any time in their life and history of violence on others. The former assesses for prior acts of sexual abuse and the latter assesses for prior convictions for violent offenses. It does not appear these two factors are assessing for prior institutional violence or sexual abuse. This does not meet this provision of the standard.

f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders shall be reassessed within 30 days of arrival. The reassessment shall consider additional relevant information received by the facility after the initial intake screening.”

Risk Screening Staff Interview - The staff that completes the reassessment said she asks the same questions that are asked for the initial screening assessment. She asks about prior victimization, sexual orientation, gender identity, and if the resident feels vulnerable to sexual abuse. She reviews the resident record to complete a full assessment within 30 days.

Resident Interviews - Most residents could recall being asked the questions a second time around a month after arriving. A few had not been at the facility long enough for the reassessment to be conducted.

Document Review - Thirty-one risk screening re-assessments were reviewed for the residents that had been at TCKC for more than 30 days. Two of the thirty-three residents reviewed did not get the reassessments yet. All thirty-one were completed within 30 days of arrival at TCKC.

g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender's risk level shall be reassessed when warranted due to a referral, incident of sexual abuse, or upon request or receipt of additional information that impacts an offender's risk of sexual victimization or abusiveness."

Risk Screening Staff Interview - The staff that complete risk screenings said if there was an incident of sexual abuse at TCKC or other information was received that changed the assessment she would complete another reassessment.

h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The offender shall not be disciplined for refusing to answer or not disclosing complete information during the assessment."

Risk Screening Staff Interview - The staff said residents do not have to answer the questions during the risk assessment interview. If they refuse, they cannot be disciplined.

i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The Superintendent (CAO) or PREA site coordinator shall control the dissemination of sensitive information related to offender sexual abuse to ensure the offender is not exploited by staff members or other offenders."

PREA Coordinator Interview - The PREA Coordinator said information obtained for the risk assessment is confidential and access to the electronic system the assessments are completed in is controlled and limited to the staff that need to complete assessments and the staff involved in reviewing them.

Risk Screening Staff interview - The staff said information gathered to complete the risk assessment is confidential and limited to the staff that conduct the risk screenings. Access to the electronic system (MOSIS) is limited to staff that complete the assessments or other staff directly involved reviewing assessments.

CORRECTIVE ACTION REQUIRED: The Risk of Victimization and Abusiveness Screening Tool must be modified to meet provision (d) and (e). Once the modification is approved, documentation of staff training and completed

	<p>assessments must be provided for review of use within required time frames in the standard.</p> <p>Corrective Action Completed: A revised set of risk screening tool completion instructions and the revised risk screening tool was sent to the facility by the PREA Coordinator. The revised risk screening tool Risk of Victimization Factor #7 was changed to Resident is, or is perceived to be gay, lesbian or bisexual, Factor #8 was changed to Resident is or is perceived to be transgender, intersex or gender non-conforming. A Risk of Abusiveness Factor #13 was added Resident has a history of prior institutional violence or sexual abuse, as known to the agency. The changes meet the requirements of the standard. The facility began using the revised risk screening tool August 2, 2024. Intake assessments and reassessments were provided for review that were completed in August, September and October. A total of twenty-one intake assessments and twenty-two reassessments were reviewed. All intake assessments were completed within 72 hours of the resident date of arrival. All reassessments were completed within 30 days of the resident date of arrival. The documents reviewed demonstrate the risk assessment that meets the standard being in use over a period of 3 months and is now part of the standard practice.</p> <p>Based on the information from corrective actions, interviews, policies and documents reviewed, this auditor finds the facility meets the standard.</p>
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115.242	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive. This shall be in accordance with the institutional services procedures regarding offender housing assignments, transgender and intersex offenders, offender recreation and activities, and probation and parole procedures regarding community supervision centers, the community release center, and contracted residential facilities."</p> <p>TCKC Standard Operating Procedure: Housing Assignment requires residents to be placed in dorms based on the Risk of Victimization/Abusiveness Status. These are the results of the risk screening assessment. Residents that have a result for risk of victimization are not placed in a dorm with residents that have a result for risk of abusiveness.</p> <p>Risk Screening Staff - Staff said the risk screening assessment results are used to place residents in the dorms. Sigmas and Alphas cannot be housed in the same</p>

dorm. Sigmas are placed in one specific dorm and Alphas in the other two. Residents that have no risk designation can be housed in any dorm.

PREA Compliance Manager – The Associate Superintendent/PREA Site Coordinator said residents that are Sigma are placed in a designated dorm. Sigma and Alpha are never placed in the same dorm.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Housing, cell, bed, education, and programming assignments shall be individualized utilizing the adult internal risk assessment with the goal of keeping separate those offenders identified at high risk of sexual victimization from offenders assessed at high risk of being sexually abusive.”

Risk Screening Staff said the placement of residents in the living area is based on an individual review of the risk screening results.

c) Missouri DOC policy IS5-3.1 Offender Housing Assignments states “The transgender committee is responsible for determining a permanent housing assignment for each transgender or intersex offender, and prior to this assignment shall meet with each offender to determine his vulnerability within the general population and length of time living as the acquired gender. Transgender and intersex housing assignments shall not be made based solely on genitalia but must consider the offender’s health and safety and the security of the facility through a review of the respective classification, medical and mental health records.”

Missouri DOC policy IS5-3.3 Transgender and Intersex Offenders provides the process for review of an offender that has identified as transgender or intersex at the risk assessment. The staff that conduct the risk assessment notify the PREA Site Coordinator of the transgender or intersex identification. The Transgender Committee is consists of the PREA Site Coordinator, medical administrator, mental health chief, medical director. The Transgender Committee has an initial meeting with the offender. The offender then meets with Mental Health to be reviewed for gender affirming items, hormone therapy treatment consideration, and discuss health and safety concerns. The Transgender Committee completes the Transgender Committee Review form and forwards it to the Transgender Review Team in central administration. The Transgender Review Team consists of the PREA Coordinator, Deputy Division Director, Director of Rehabilitative Services.

The MODOC Division of Probation and Parole procedure P4-4.4 Transgender or Intersex Clients provides procedures for the Transgender Committee at a Community Supervision Center. The policy states the CSC Transgender Committee is comprised of the Superintendent, Associate Superintendent, a Community Transition Officer II, and the clients Probation and Parole Officer. The committee considers the historical overview of the client’s transgender or intersex status that includes the status of transition, amount of time living as the identified gender, and the client’s views of safety. The committee decision is required to be made within 3 days of arrival. During that 3 days, the resident will be place in a bed assignment based on the risk screening results.

PREA Site Coordinator - The Associate Superintendent said TCKC has a transgender resident that did not want to participate in the transgender committee. If a resident does identify as transgender at the risk screening or anytime after that, the resident would meet with the Transgender Committee to review facility housing placement, shower arrangements and gender affirming items. The facility documents recommendations on the Transgender Committee Review form and sends it to the PREA Coordinator for the Transgender Review Team in central administration to make a final decision.

Resident Interview - A resident that identified as transgender during the risk assessment said they did not want to participate in the transgender committee or shower separate from other residents while at TCKC.

PREA Coordinator - The PREA Coordinator said the facility Transgender Committee makes recommendations and sends the Transgender Review form him to present to the Transgender Review Team in central administration. The Transgender Review Team members are the PREA Coordinator, Deputy Division Director, and Director of Rehabilitative Services. The review gives serious consideration to the transgender or intersex resident's views of vulnerability and safety. The review also considers history of the resident's status as transgender or intersex; institutional adjustment; risk assessment history; PREA investigation involvement; program assignments; medical history; special accommodations; and security concerns of the resident or staff. The Transgender Review Team makes a final decision within 10 days and sends a copy back to the facility.

d) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee shall meet with the offender within 10 working days of either the offender's arrival to the facility or upon learning the offender's transgender or intersex status and every 6 months thereafter."

The Associate Superintendent said there were no transgender residents reviewed by the committee in the last 12 months. The program is short term. Most transgender residents will be released at the time the next review is required, however if they are still at TCKC, the review would be completed by the committee again.

e) Missouri DOC policy IS5-3.1 Offender Housing Assignments states "The transgender committee review shall include the following: (1) Offender's view of his vulnerability."

PREA Site Coordinator - The Associate Superintendent said if a transgender resident chose to shower separate from the other residents they could shower in one of the two vacant dorms. The Transgender Committee would discuss shower arrangement options with the transgender resident.

f) PREA Site Coordinator - The Associate Superintendent said gay, bisexual, transgender, and intersex residents are not placed in a dedicated housing unit. They are placed based on the risk assessment outcome the same as other residents

	<p>Resident Interviews – One gay resident and one resident that identified as transgender were interviewed. Neither said they were placed in a dorm that was dedicated to gay, bisexual or transgender residents.</p> <p>The facility meets the standard based on the information obtained from interviews and policies reviewed.</p>
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115.251	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request (IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline, and. advocacy agency.” The methods of reporting are communicated to inmates in the PREA offender brochure and resident handbook provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC, report to any staff, or calling the PREA hotline toll free.</p> <p>Document Review – the resident handbook was provided for review. Information about reporting sexual abuse and sexual harassment is provided under the Prison Rape Elimination Act section. The methods of reporting are tell any staff or write any staff; write to the Missouri Department of Public Safety, Crime Victim’s Unit; or call the PREA hotline. The PREA brochure contains the same reporting information as the resident handbook.</p> <p>Tour Observations – PREA reporting information posters were observed in resident living areas, dayrooms, recreation area, facility entrance/visiting area, and by the resident phones. The posters were in English and Spanish. They were posted where residents could easily read them.</p> <p>Random Staff Interviews – All staff said residents could report sexual abuse and sexual harassment either verbally or in writing to any staff and by calling the PREA hotline.</p> <p>Resident Interviews – All residents said they could report sexual abuse or sexual harassment, retaliation or staff neglect of duty by calling the PREA hotline, telling any staff, filing a grievance, writing to staff or writing anonymously to an outside organization. Some said their family could report by calling the hotline or the facility.</p>

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail and not subject to examination." The policy requires an external reporting method that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure.

PREA Site Coordinator - The Associate Superintendent said residents can write to the Department of Public Safety, Crime Victims Unit if they want to report outside of the MODOC. This correspondence is privileged and not subject to review by staff.

Postage is covered and the resident can leave their name off the envelope and correspondence if they want to remain anonymous.

Resident Interviews - residents said they were told at intake they can write to an outside organization to report anonymously. They also see it on posters in the facility. Some recalled that it was the Crime Victims Unit with the Department of Public Safety.

Tour Observation - PREA reporting posters were observed throughout the facility. The posters provided information about reporting to the Crime Victims Unit by writing and the resident can remain anonymous.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure."

Random Staff Interviews - Staff said they were required to receive reports from residents or third parties both verbally and in writing. All staff said they would have to immediately report the information to their supervisor or the Associate Superintendent. Staff are required to document the report in an interoffice communication to their supervisor and the Associate Superintendent.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct." The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.

Random Staff Interviews - All staff said they could make a private report by talking privately to their supervisor, the Associate Superintendent or by calling the PREA hotline or ethics line. They could make the call when off work and could be anonymous.

The facility meets the provisions of this standard based on the information above

	from interviews, policies and documents reviewed.
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115.252	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall provide multiple ways for offenders to make anonymous reports of allegations of offender sexual abuse and harassment, retaliation, staff member neglect, and violation of responsibilities that may have contributed to an incident of offender sexual abuse, to include but not limited to: a. informal resolution request (IRR), grievance process, or offender complaint, b. a staff member, c. PREA hotline, and. advocacy agency.” The methods of reporting are communicated to inmates in the PREA offender brochure and resident handbook provided at intake orientation. The methods are writing to the Missouri Department of Public Safety that is external to the MODOC, report to any staff, or calling the PREA hotline toll free.</p> <p>Document Review – the resident handbook was provided for review. Information about reporting sexual abuse and sexual harassment is provided under the Prison Rape Elimination Act section. The methods of reporting are tell any staff or write any staff; write to the Missouri Department of Public Safety, Crime Victim’s Unit; or call the PREA hotline. The PREA brochure contains the same reporting information as the resident handbook.</p> <p>Tour Observations – PREA reporting information posters were observed in resident living areas, dayrooms, recreation area, facility entrance/visiting area, and by the resident phones. The posters were in English and Spanish. They were posted where residents could easily read them.</p> <p>Random Staff Interviews – All staff said residents could report sexual abuse and sexual harassment either verbally or in writing to any staff and by calling the PREA hotline.</p> <p>Resident Interviews – All residents said they could report sexual abuse or sexual harassment, retaliation or staff neglect of duty by calling the PREA hotline, telling any staff, filing a grievance, writing to staff or writing anonymously to an outside organization. Some said their family could report by calling the hotline or the facility.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Offenders may make anonymous reports of allegations of offender sexual abuse to the Department of Public Safety, Crimes Victims Services Unit. All offender mail addressed to the Crimes Victims Services Unit shall be treated as confidential mail and not subject to examination.” The policy requires an external reporting method</p>

	<p>that meets the provision of this standard. This information was observed on PREA reporting posters in inmate housing units and on the PREA offender brochure.</p> <p>PREA Site Coordinator - The Associate Superintendent said residents can write to the Department of Public Safety, Crime Victims Unit if they want to report outside of the MODOC. This correspondence is privileged and not subject to review by staff. Postage is covered and the resident can leave their name off the envelope and correspondence if they want to remain anonymous.</p> <p>Resident Interviews - residents said they were told at intake they can write to an outside organization to report anonymously. They also see it on posters in the facility. Some recalled that it was the Crime Victims Unit with the Department of Public Safety.</p> <p>Tour Observation - PREA reporting posters were observed throughout the facility. The posters provided information about reporting to the Crime Victims Unit by writing and the resident can remain anonymous.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All allegations including anonymous, third party, verbal, or allegations made in writing shall be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure."</p> <p>Random Staff Interviews - Staff said they were required to receive reports from residents or third parties both verbally and in writing. All staff said they would have to immediately report the information to their supervisor or the Associate Superintendent. Staff are required to document the report in an interoffice communication to their supervisor and the Associate Superintendent.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members may anonymously report allegations of offender sexual abuse, harassment, or retaliation utilizing the employee reporting hotline in accordance with department procedure regarding discrimination, harassment, retaliation, or unprofessional conduct." The Employee Handbook was provided for review. It informs staff at the end of an employee reporting line to call for reporting unprofessional conduct. It also instructs staff to immediately report any knowledge or suspicion of sexual abuse of an inmate to their immediate supervisor or the Chief Administration Officer of the facility.</p> <p>Random Staff Interviews - All staff said they could make a private report by talking privately to their supervisor, the Associate Superintendent or by calling the PREA hotline or ethics line. They could make the call when off work and could be anonymous.</p> <p>The facility meets the provisions of this standard based on the information above from interviews, policies and documents reviewed.</p>
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	<div data-bbox="279 114 983 152">Auditor Overall Determination: Meets Standard</div> <div data-bbox="279 192 564 230">Auditor Discussion</div> <div data-bbox="279 271 1484 600"><p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall offer alleged victims of offender sexual abuse, a victim advocate to provide emotional support services, crisis intervention during the sexual assault exam, when applicable, during the investigative process. When an allegation of sexual harassment is forwarded for investigation, the alleged victim of sexual harassment will be offered a victim advocate. Offenders shall be allowed to communicate with an advocate by mail or special visit in a confidential manner as possible to maintain safety and security of the institution.”</p></div> <div data-bbox="279 633 1484 880"><p>Resident Interviews – Residents were asked if they were told there are services available for victims of sexual abuse and sexual harassment. They could recall staff telling them at orientation about victim services. They knew one of the staff was a victim advocate and that they could write to organizations they see on posters on the wall. One resident that reported sexual abuse was offered a victim advocate when she reported. She said she saw the staff victim advocate.</p></div> <div data-bbox="279 913 1484 1120"><p>Tour Observations – During the tour, signs that provided information about three victim advocate organizations were observed posted on the walls by the phones and in the living areas. The PREA brochure that is provided at intake informs residents a victim advocate will be provided if requested. A copy of the poster and PREA brochure was provided through the PAQ.</p></div> <div data-bbox="279 1153 1484 1359"><p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Before being given access to a victim advocate, the offenders shall be informed of the extent to which communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory reporting laws.”</p></div> <div data-bbox="279 1393 1484 1682"><p>Victim Advocate Posters – Victim Advocate posters were observed in living areas and by the phones on the facility tour. The posters provided the contact information to MOCSA, Just Detention International and the Rape, Abuse and Incest National Network. This auditor contacted Just Detention International and was informed they had not received any correspondence during the review period. The posters inform inmates that telephone calls are monitored and that mail to these organizations is confidential and not subject to examination.</p></div> <div data-bbox="279 1715 1484 1879"><p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If a facility is unable to enter into a MOU with the advocacy center, the attempt shall be documented and advocacy services shall be provided by a qualified staff member.”</p></div> <div data-bbox="279 1912 1484 2036"><p>The facility provided a memorandum of understanding with the YWCA of St Joseph for victim advocate services at forensic examinations at Mosaic Medical Center and at investigator interviews at TCKC. The memorandum was signed in January of 2024</p></div>
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	<p>Victim Advocate Interview – A victim advocate from MOCSA was called to verify the letter of agreement with TCKC. If a VA needs to see a resident, they would arrange a special visit through the PREA Site Coordinator. She said MOCSA will provide victim advocate services to residents at a forensic examination.</p> <p>The facility meets the provisions of this standard based on the information from tour observations, interviews, policies and documents reviewed.</p>
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115.254	Third party reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Tour Observations – Posters with information about reporting sexual abuse and sexual harassment were posted in the entrance/visiting area, living areas, recreation area and dayrooms.</p> <p>MODOC PREA Webpage – The Missouri DOC PREA webpage provides information under the Friends and Family section for reporting sexual abuse and sexual harassment by calling, writing or emailing. This was observed at https://doc.mo.gov/programs/PREA.</p> <p>A test report was sent on the PREA email prior to the onsite audit. A message was received back in two days acknowledging the message was received the same day it was sent. A test report was made to the PREA hotline after the onsite audit. The Missouri DOC PREA Coordinator emailed back acknowledging receiving the call within 24 hours.</p> <p>Resident Interviews – Most residents knew their family could report sexual abuse or sexual harassment for them if they contacted the facility or call the PREA hotline.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>

115.261	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Failure to report offender sexual abuse is a Class A misdemeanor in accordance with Missouri state statute. All staff members, shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or</p>

sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure.”

Random Staff Interviews – All Staff said they are required to report all information, knowledge, or suspicion of sexual abuse or sexual harassment, retaliation, or staff neglect to report sexual abuse information. Staff said they are mandated reporters by state law. The information can be provided verbally initially and then in a written report as soon as possible.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Staff members are prohibited from revealing any information related to an allegation of offender sexual abuse or harassment other than to the extent necessary to make treatment, investigation, and other security and management decisions.”

Random Staff Interviews – Staff said the information about an incident of sexual abuse or sexual harassment they receive from a resident is confidential and can only be shared with staff that are directly involved in the response. They cannot discuss what they know with other staff.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Medical and mental health staff members shall inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes.”

Medical Staff Interview – Medical staff said inmates are notified of their duty to report any information the inmate reveals about an incident of sexual abuse that occurred in a correctional institution. They have the inmate sign a form at intake that tells them about the duty to report and limits of confidentiality.

Mental Health Staff Interviews - Mental Health staff said they notify inmates of their duty to report information about sexual abuse in an institution each time they provide services.

Document Review – PREA Healthcare Duty to Report forms were provided for review for ten inmates received during the review period. The form documents the notice to inmates that medical and mental health staff have a duty to report any report of sexual abuse and sexual harassment that occurred in an institution to medical or mental health staff during the initiation of services.

d) A search of the internet found reports of sexual abuse of a vulnerable adult must go to Adult Protective Services at the Department of Health and Senior Services.

Facility Director Interview – The Superintendent said TCKC does not house residents under 18 years of age. If the resident fits the definition of a vulnerable adult under state law, a report of sexual abuse would be provided to the Adult Protective Services as required.

	<p>e) Facility Director Interview - The Superintendent said all allegations of sexual abuse and sexual harassment are referred to the investigators in the PREA Unit at central administration for the MODOC. TCKC does not have investigators.</p> <p>The facility meets this standard based on the information from interviews, policies and documents reviewed.</p>
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115.262	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All allegations of offender sexual abuse and/or harassment, including third party and anonymous reports, shall immediately be forwarded to the shift supervisor to initiate the coordinated response utilizing the applicable PREA allegation notification penetration/non-penetration event checklist." The facility reported zero incidents of imminent risk of sexual abuse in the past 12 months.</p> <p>Agency Head Interview - The Division Director said the facility would immediately remove an offender from a situation that is a substantial risk of imminent sexual abuse. The facility could move the offender to another work, program, housing assignment or place the offender in protective custody and transfer to another facility.</p> <p>Facility Director Interview - The Superintendent said if a resident reports a substantial risk of imminent sexual abuse, the supervisor on the shift will immediately notify her. The supervisor at the facility will place the victim in one of the two unoccupied housing units to separate him from the alleged perpetrator. The perpetrator may be placed in a cell in the separation housing unit. The PREA Unit would be immediately contacted. The facility has not had an incident of risk of imminent sexual abuse in the last 12 months.</p> <p>Random Staff Interview - Staff said if a resident was at risk of imminent sexual abuse, they would immediately try to determine who the perpetrator is and separate from the victim. Notify the shift supervisor immediately and keep the resident safe.</p> <p>The facility meets the standard based on the information from interviews and policies reviewed.</p>

115.263	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>a-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving an allegation that an offender was sexually abused while confined at a facility outside of the department, the CAO or designee or the appropriate office shall ensure the outside facility is notified of the allegation within 72 hours. The CAO or designee shall maintain documentation of the allegation received and when the outside facility was notified with the allegation.”</p> <p>Facility Director Interview – The Superintendent said if a resident reports to TCKC staff an incident of sexual abuse that occurred at another facility, the staff will document the information in a report and provide the report to the shift supervisor and her. She said she will call the other facility to provide an immediate notification and then send the information to the facility head via email within 72 hours. If the investigator for the other facility needs additional information from the resident, she will assist by making the resident available to the investigator or contacting a PREA Unit Investigator. She said the facility has not had a resident report sexual abuse that occurred at another facility during the last 12 months. This was reported on the PAQ.</p> <p>d) Facility Director Interview – The Superintendent said if she is contacted by another facility head about a report of sexual abuse from a former TCKC resident, she will forward the report to the PREA Unit Manager and request an investigation. She said TCKC has not received a report of sexual abuse that occurred at TCKC from another facility in the last 12 months. This was also reported on the PAQ.</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>
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115.264	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “In the event of an allegation of a penetration act, the first responder shall take the following steps: (1) Ensure the safety of the victim. (2) Request the victim not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable. (3) To the extent possible, ensure the alleged perpetrator does not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (4) The shift supervisor shall make telephone notifications and respond as outlined in the facility’s coordinated response to offender sexual abuse protocol.”</p> <p>Random Staff Interviews – Security Staff said if a resident reports being sexually</p>

	<p>assaulted within the last 72 hours they would instruct the victim to not change clothes, shower, brush teeth, eat drink, smoke or use the restroom in order to protect evidence from being destroyed. Non-security staff said they would instruct the victim not to change clothes, shower, brush teeth, eat drink, or use the restroom in order to protect evidence from being destroyed. They would then notify security staff, specifically the supervisor on the shift, and wait for security staff to come take custody of the inmate. All staff said they would separate the victim from other residents and keep him safe.</p> <p>Investigation File Review – there were three allegations of sexual abuse involving staff during the review period. None of the allegations involved the collection of physical evidence.</p> <p>The facility meets the standard based on the information from interviews, policies and documents reviewed.</p>
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115.265	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The facility provided Coordinated Response Plan for TCKC was provided for review. The plan provides the response protocol for first responders, shift supervisors, PREA Site Coordinator, Superintendent (COA), medical staff, mental health staff and PREA Unit Investigators. The plan requires the PREA Unit Investigator to respond to the facility but also allows the facility to call local law enforcement to assist in response to a penetration event. However, the PREA Unit Investigator will conduct the investigation.</p> <p>PREA Coordinator Interview – The PREA Unit Manager said the CSC Coordinated Response Protocol does allow the facility to call local law enforcement, but the PREA Unit Investigator will conduct the investigation. Local law enforcement will only assist in the response.</p> <p>Facility Director – the Superintendent said if a sexual assault was reported or there was an imminent risk of sexual abuse allegation, the staff would follow the Coordinated Response Plan Protocol that provides direction to first responders and the shift supervisor for immediate response. The shift supervisor would secure an alleged resident perpetrator in separation room and make the required notifications. The resident victim may have to be sent out to the hospital for medical care and possible forensic examination.</p> <p>The facility meets the standard based on the information from the policies and plan provided and the interviews.</p>

115.266	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) MDOC policy D2-11.6 Labor Organization states “Per the Prison Rape Elimination Act, the department shall not enter into or renew any collective bargaining agreements or other agreements that limit the department’s ability to remove alleged staff sexual abusers from contact with any offender or resident pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.”</p> <p>Agency Head – The designee for the MODOC Director said the Missouri DOC does have an active bargaining unit agreement, but it does not limit the agency’s ability to remove staff alleged to have committed sexual abuse away from inmates during the investigation the same as other staff.</p> <p>PREA Coordinator Interview – The PREA Coordinator said the Missouri DOC has a collective bargaining agreement for staff, but it does not prevent the removal of staff from contact with an offender that alleged sexual abuse by the staff. He said the agreement has expired and has not been renewed.</p> <p>Document Review – the expired agreement was provided for review. The agreement presented expired in September of 2018. The MODOC does not have a labor agreement that prevents the removal of staff during an investigation of sexual abuse or sexual harassment.</p> <p>The facility meets the standard based on information from interviews, policies and documents reviewed.</p>

115.267	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA site coordinator shall ensure victims, individuals who report sexual abuse, and those that cooperate with offender sexual abuse investigations are monitored and protected from retaliation.”</p> <p>The facility had no allegations of sexual abuse or sexual harassment and had no retaliation monitoring as a result.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment requires the PREA Site Coordinator to offer emotional support services to offender</p>

victims, witnesses, reporters, staff reporters and staff witnesses.

Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.

Facility Director – The Superintendent said the Associate Superintendent is conducting retaliation monitoring. If resident retaliation is suspected or reported, we would meet with the resident and separate them by moving the resident that is retaliating to the small living area that is separate from the main living area if the circumstances allow. Progressive discipline may be used. If the retaliation is serious, the resident retaliating can be removed from the program/facility. If staff are retaliating, we would separate the staff from the resident area or put them on a temporary suspension depending on the circumstances and use progressive discipline.

Staff Designated for Monitoring – The Associate Superintendent said she is designated to conduct retaliation monitoring. If there was suspected retaliation by a resident, she could move the resident that is retaliating to an unoccupied housing unit or the separation living area to separate the residents. If the retaliation was serious, the resident would be removed from the program. Retaliation involving staff would result in an investigation and placing the staff on a no contact assignment until the investigation is completed. The staff would be subject to progressive discipline.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The alleged victim of offender sexual abuse shall be monitored for a minimum of 90 days to assess any potential risk or act of retaliation. The assessment-retaliation status checklist form shall be used during each of the assessment interviews. If the victim expresses fear of retaliation, monitoring shall continue for an additional 90 day period or until the victim or reporter is no longer in fear of retaliation or if the investigation is unfounded.”

Associate Superintendent – The Associate Superintendent said she meets with the resident victim for the initial meeting soon after the report is made and then meets with them every 30 days for up to 90 days. To monitor for retaliation, she reviews conduct, changes in bed assignment or loss of privileges. She also monitors the provision of emotional support services. She said she also asks the resident if they think someone is retaliating against them. If there is retaliation, she will have it investigated immediately. If there is a need to continue monitoring, she can extend it for 90 days.

Document Review – Retaliation monitoring was conducted for the alleged victim in three investigations of sexual abuse. Monitoring included meetings with the alleged victim to ask about possible retaliation and review housing/program assignment changes. In one case, a resident that made a third-party report was also monitored for retaliation for one meeting. All three victims were not monitored for the full 90 days due to the residents being released from the facility prior to the 90 days. All monitoring was documented on the Assessment/Retaliation Status Checklist form.

	<p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Monitoring shall include face-to-face status checks.”</p> <p>Associate Superintendent – The Associate Superintendent said the meeting with the resident is face to face every 30 days for a total of four meetings.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Reporters and witnesses shall be monitored for retaliation at the minimum of one time utilizing the assessment-retaliation status checklist form. If no retaliation is reported, monitoring will cease.” This requirement of the policy should include inmate reporters. Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims.</p> <p>Agency Head – The Assistant Director said retaliation monitoring is conducted for all victims, witnesses and reporting parties. Monitoring meetings occur at 30, 60 and 90 days. If retaliation is reported it is investigated.</p> <p>PREA Compliance Manager – The Associate Superintendent said if witnesses or other residents or staff that cooperate with an investigation express a fear of retaliation, she will conduct monitoring for them as well.</p> <p>CORRECTIVE ACTION REQUIRED: Provision (d) requires inmates to have periodic status checks and provision (c) requires monitoring for 90 days. As a result, inmate reporters must also have periodic meetings for 90 days the same as inmate victims. The policy and practice must be changed to conduct monitoring for inmate reporters the same as monitoring for inmate victims. Provide the policy change and documentation of the change in policy and practice being communicated to all PREA Site Coordinators.</p> <p>Corrective Action Completed: The Agency has updated policy D1-8.13 Offender Sexual Abuse and Harassment to now include third-party inmate reporters in face-to-face monitoring meetings for 90 days, aligning with the existing monitoring requirements for inmate victims. Staff who report sexual abuse will undergo 90 days of monitoring and receive a flyer detailing how to report any retaliation to the Warden, PREA Hotline, CLEAR line, PREA Email, or the Office of Professional Standards email. Offenders or staff who cooperate in a sexual abuse investigation as witnesses and express concerns about retaliation will be evaluated and protected from retaliation. This policy revision and its implementation were communicated to the PREA site Coordinators (PCM) by the PREA Unit Manager (PREA Coordinator) on August 23, 2024, via email.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of the standard.</p>
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	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department shall ensure that administrative and/or criminal investigations are completed for all allegations of sexual abuse and repeated allegations of sexual harassment.”</p> <p>PREA Unit Investigator - The PREA Unit Investigator said she is immediately contacted by the facility when there is an allegation of sexual abuse or sexual harassment received at TCKC. The PREA Unit conducts all investigations at TCKC.</p> <p>Investigation File Review: There were three completed investigations of sexual abuse during the review period. The investigations were prompt, thorough and objective. All three investigations was in response to a third party report. One was also reported by another resident anonymously.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Investigators shall receive specialized PREA investigation training prior to conducting an investigation involving offender sexual abuse.” The PREA Unit Investigators conduct all of the sexual abuse investigations</p> <p>PREA Unit Investigator – The PREA Unit Investigator said she has completed the NIC Sexual Abuse Investigations in a Confinement Setting, the NIC Advanced Sexual Abuse Investigations training and training by VAWA online.</p> <p>Document Review – NIC training certificates were provided for thirteen investigators in the PREA Unit.</p> <p>c) PREA Unit Investigator Interview – The PREA Unit Investigator said she receives a Request for Investigation from the facility and the PREA Notification Checklist when there is a sexual abuse or sexual harassment allegation. The PREA Unit Investigators conduct the administrative and criminal investigations for sexual abuse and sexual harassment for TCKC. She reviews the initial information, reviews video evidence if available, conducts a background investigation of the victim and subject, interviews the victim, witnesses and subject. She will collect physical evidence from forensic exams or at the scene of the incident.</p> <p>d) PREA Unit Investigator Interview – The PREA Unit Investigator said they do not conduct compelled interviews. If a possible criminal violation is identified, she will contact the local prosecuting attorney to write the Probable Cause Statement and send it certified mail to document the referral.</p> <p>e) PREA Unit Investigator Interview – The PREA Unit Investigator said she is not allowed to subject the victim to a truth telling device. The subject of the investigation could be asked to complete a voice stress analysis. She determines the subject’s credibility on a case-by-case basis from the background review of prior criminal history, PREA investigations and conduct history.</p>
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	<p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall include an effort to determine whether staff member actions or failure to act contributed to the abuse.”</p> <p>PREA Unit Investigator – The PREA Unit Investigator said she reviews staff actions in relation to the coordinated response plan, policies and procedures. This is documented in the administrative investigation report.</p> <p>Investigation File Review – the facility provided three administrative sexual abuse investigations for the review that occurred during the review period. All three investigations contained a thorough description of physical, testimonial, and documentary evidence. A review of staff actions was documented in all three investigations.</p> <p>g) PREA Unit Investigator Interview – The investigator said she documents physical evidence collected, all interviews conducted, the review of video evidence and documentary evidence for criminal investigations.</p> <p>In the three investigations completed during the last 12 months, the investigator reviewed video evidence, J-Pay emails, telephone calls. The evidence review was thoroughly documented in the investigation report. The victim, subject and any potential witness interviews were documented in the investigation reports.</p> <p>h) PREA Unit Investigator Interview – The investigator said if a possible criminal violation is identified, she will contact the local prosecuting attorney for guidance and to write the Probable Cause Statement. She will send it certified mail to document the referral.</p> <p>i) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Inquiries regarding offender sexual abuse and harassment and all supporting documents shall be retained as long as the alleged perpetrator is incarcerated or employed with the department, plus 5 years and in accordance with the department procedure regarding records retention.”</p> <p>j) PREA Unit Investigator Interview – The PREA Unit investigator said if the victim or the subject left the facility, she would do her best to contact staff via telephone with contact information from HR or contact the Parole Officer for the inmate to arrange a phone interview.</p> <p>In one investigation of staff sexual misconduct, the staff resigned at the beginning of the investigation. The investigator continued the investigation by calling the staff and doing the interview over the phone.</p> <p>The facility meets the provisions of the standard based on the interviews, policies and documents reviewed.</p>
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Administrative investigations shall impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.” The facility reported no reports of sexual abuse or sexual harassment or completed investigations during the review period.</p> <p>Investigator Interview – The PREA Unit Investigator said preponderance of evidence is the evidence standard used for all administrative investigations by the Missouri DOC investigators. She said there must be more than 50% of the evidence supporting the alleged incident occurred as reported to be substantiated.</p> <p>Investigation File Review – Three investigations of sexual abuse by staff were provided for review. One had a substantiated finding that was based on the preponderance of evidence.</p> <p>The facility meets this standard based on the interview, policy and document reviewed.</p>

115.273	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon the completion of an offender sexual abuse investigation, the department’s PREA unit shall make written notification to the alleged victim regarding the outcome of the investigation utilizing the applicable PREA alleged sexual abuse by offender notification form or the PREA alleged sexual abuse by staff member notification form.” The facility reported three sexual abuse investigations being completed during the last 12 months. One notice of outcome was provided to a resident in writing. Two were not provided to the resident due to being released from the facility prior to the conclusion of the investigation.</p> <p>Director Interview – The Superintendent said when an investigation concludes, the PREA Unit Investigator will send a written notification of outcome to the facility PREA Site Coordinator. The PREA Site Coordinator will provide the notification to the resident.</p> <p>Investigator Interview – The PREA Unit Investigator said she fills out the written notification for the outcome of the investigation and sends it to the PREA Site Coordinator at TCKC so it can be provided to the resident. There are two forms, one for incidents involving staff and one for incidents involving inmates or residents.</p>

	<p>She would complete the notification form and send it to the PREA Site Coordinator to provide to the resident.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "All subsequent notifications shall be made when: Staff member on offender allegations: following the completion of the investigation, the offender shall be notified when the following occurs (unless the investigation is unfounded); The staff member perpetrator is no longer assigned to the housing unit; The staff member perpetrator is no longer employed by the department; The staff member perpetrator has been indicted on a charge related to sexual abuse within the institution; A disposition of charges exists related to sexual abuse within the institution." The facility reported three sexual abuse investigations being completed during the last 12 months. One notice of outcome was provided to a resident in writing. Two were not provided to the resident due to being released from the facility prior to the conclusion of the investigation.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Offender on offender allegations: following the completion of an investigation, the offender shall be notified when the following occurs: (1) The offender has been indicted on a charge related to sexual abuse within the institution. (2) A disposition of charges exists related to sexual abuse within the institution." There were no completed investigations of sexual abuse committed by a resident on another resident during the review period.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The PREA unit shall forward the written notification to the offender via the PREA site coordinator. The PREA site coordinator shall ensure that the written notification is provided to the offender in a confidential manner."</p> <p>The facility meets the provisions of this standard based on the interviews, documents and policies reviewed.</p>
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115.276	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures." The policy follows this provision.</p> <p>b-c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "Termination from the department shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse." The policy follows this provision.</p>

	<p>Document Review – There were three investigations of staff sexual abuse during the review period. One was substantiated for behavior that did not appear to be criminal. That staff resigned prior to the conclusion of the investigation. The email resignation by the staff was provided for review.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “All terminations for violations or the resignation of a staff member, who would have been terminated if not for their resignation, shall be reported to relevant licensing or accreditation bodies and law enforcement.” The policy follows this provision. The facility reported on the PAQ there were no staff disciplined short of termination during the review period.</p> <p>The facility meets the provisions of this standard based on the documents and policies reviewed.</p>
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115.277	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies and law enforcement.” The policy reflects the provisions of the standard. The facility reported on the PAQ there were no contract staff disciplined during the last 12 months.</p> <p>Facility Director – The Superintendent said if a volunteer or contract staff were to be involved in an incident of sexual abuse or sexual harassment, she would temporarily suspend them pending the investigation outcome. If the investigation is substantiated, she would terminate their involvement with the facility. If the volunteer or contract staff had a professional license, she would refer the information to the Missouri Division of Professional Registration.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>

115.278	Disciplinary sanctions for residents
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states</p>

“Offenders shall be subject to corrective actions or violations pursuant to a formal disciplinary process following an administrative finding or a criminal finding of guilt when the offender engaged in offender-on-offender sexual abuse in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard. The facility reported on the PAQ there were no resident on resident administrative or criminal findings of sexual abuse during the last 12 months.

b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender’s disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.

Facility Director – The Superintendent said if a resident is found to have committed sexual abuse or sexual harassment, he would be disciplined in accordance with the severity of the offense and prior history of discipline.

c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The corrective action process shall consider whether an offender’s mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, shall be imposed in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.

Facility Director – The Superintendent said mitigating factors, such as cognitive disabilities, would be considered in determining sanctions. Sanctions could be loss of privileges or removal from the program.

d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “If found guilty of sexual abuse, the PREA site coordinator or designee shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse.”

Facility Director – The Superintendent provided a memorandum that said a resident that is determined to have committed sexual abuse will be discharged from the TCKC program and would not receive therapy or counseling.

e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “An offender who has sexual contact with a staff member may only be disciplined if the staff member did not consent to the contact.”

f) Missouri DOC policy IS19-1.6 Offender Accountability Program states “a report of sexual misconduct, made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying.” The policy reflects this provision of the standard.

	<p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The department prohibits all sexual activity between offenders. Consensual sexual activity between offenders shall not be deemed sexual abuse and shall be addressed in accordance with divisional and institutional services procedures regarding offender accountability program.” The policy reflects this provision of the standard.</p> <p>Missouri DOC Probation and Parole policy P4-4.30 Documenting and Responding to Violations of Facility Rules states under section C Violations of Sexual Misconduct General Information “If prohibited consensual sexual activity is identified, then facility staff may sanction clients for such activity and shall not be considered a Prison Rape Elimination Act.”</p> <p>The facility meets the provisions of the standard based on the information from interviews and policies reviewed.</p>
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115.282	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall receive timely, unobstructed access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by health services practitioners according to their professional judgment.”</p> <p>Medical Staff Interview – Medical staff said inmates that are victims of sexual abuse would be assessed and treated for emergent injuries and instructed not to destroy evidence until a forensic examination can be conducted. The forensic exam can be conducted by the SANE at a local hospital with a forensic exam department.</p> <p>b) Staff Interviews – Staff said if a resident reports sexual abuse to them, they would separate the victim from the perpetrator and contact the DA. The supervisor on shift would call the hospital and they would help take the resident to the hospital if they were told to. Two shift supervisors were interviewed. Both said they have protocols that involve contacting the hospital and arranging for the victim to be transported.</p> <p>Investigation File Review – documentation from three sexual abuse cases indicated three inmate victims were offered mental health services after reporting sexual abuse but declined.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted</p>

	<p>infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections by the hospital SANE.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.283	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each victim and abuser shall be offered medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans. When necessary, referrals shall be completed for continued care following their transfer to, or placement in, other facilities or their release from custody.”</p> <p>Medical Staff Interview – Medical staff said inmate victims of sexual abuse would be provided follow up treatment on injuries and medication management for STI care.</p> <p>Mental Health Staff Interview – Mental health staff said victims of sexual abuse would be offered treatment services based on trauma informed care.</p> <p>Investigation File Review – None of the victims in the three sexual abuse investigations required medical follow up services. The resident victims involved in these cases were not interviewed as they had been released.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims and abusers shall be provided with medical and mental health services consistent with the community level of care.”</p> <p>Mental Health Staff Interview – Mental health staff said the victim would be provided mental health services similar to services offered in the community.</p> <p>Medical Staff Interview – The medical staff said the medical services provided are consistent to the services offered in the community.</p>

	<p>f) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Victims of sexual abuse shall be offered timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>Medical Staff Interview – Medical staff said sexual abuse victims would be tested and treated for sexually transmitted infections. If the inmate goes to a local hospital, the SANE there would conduct the testing and TCKC medical staff would follow up on the medication.</p> <p>g) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>The Superintendent provided information regarding the Sexual Assault Forensic Exam program through the Missouri Department of Public Safety that covers the costs for forensic exams for victims of sexual abuse.</p> <p>h) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Upon receiving a report of a substantiated case of offender sexual abuse the PREA site coordinator shall submit a referral and screening note - health services form to ensure the perpetrator shall be assessed by qualified mental health professional (QMHP) within 60 days of learning of such abuse.”</p> <p>Mental Health Staff Interview – Mental health staff said therapies that focus on what pushes them to abusive behavior would be provided to the inmate perpetrators.</p> <p>The facility meets the provisions of this standard based on the information from interviews and policies reviewed.</p>
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115.286	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.</p> <p>Document Review – The facility reported three allegations of sexual abuse during the last 12 months. All three were reviewed by the facility incident review team.</p>

	<p>The reviews were documented on the PREA Sexual Abuse Incident Debriefing form. The reviews were completed within 30 days of the investigation conclusion.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Each facility shall conduct a sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation. A sexual abuse incident debriefing is not required following offender sexual harassment investigations or when a sexual abuse investigation is unfounded.” The policy reflects this provision of the standard.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The review team for offender sexual abuse events shall include the PREA site coordinator, and other upper-level administrators, when applicable, with input from the shift supervisor, investigators, and medical or mental health practitioners.” The policy reflects this provision of the standard.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The PREA sexual abuse incident debriefing report shall be completed by the PREA site coordinator outlining in detail the findings of the incident debriefing sessions and recommendations for improvements utilizing the PREA sexual abuse incident debriefing form.” The form requires the review team to answer questions for the five factors in this standard.</p> <p>e) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “The facility shall implement the recommendations for improvement or shall document its reasons why recommendations shall not be implemented.” The policy reflects this provision of the standard.</p> <p>Facility Director – The Superintendent said the incident review team would consist of her, the PREA Site Coordinator, Major, Shift Supervisor, medical, mental health and PREA Unit Investigator. All evidence and the investigation reports are reviewed. The staff response to the report, actions that may have contributed to the incident, staffing levels/monitoring, victim characteristics, perpetrator characteristics/history are all reviewed. Corrections are made if problems are identified that is facility specific. Corrections for agency level issues are recommended and sent to the PREA Unit.</p> <p>PREA Coordinator/Incident Review Team – The Associate Superintendent said there has been a review of three incidents during the last year. If they did have to do a review it would be her, the Major, medical, mental health, Shift Supervisor and the Superintendent, PREA Unit Investigator, shift supervisor on the review team. They will review all evidence, the investigation report and staff response. They would determine if there was a staffing issue, blind spot or other contributing factor.</p> <p>The facility meets the provisions of this standard based on the information from interviews, documents and policies reviewed.</p>
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Annual Site Report: Each facility shall utilize information from the offender sexual abuse incident debriefings to prepare an annual report to be submitted to the department’s PREA manager by the last working day in March.” The policy provides the definitions for sexual abuse and sexual harassment in section II. The definitions are equal to the definitions in the PREA standards.</p> <p>The 2023 TCKC PREA Annual report was provided for review. The report covers the data for reports of sexual abuse and sexual harassment during the last year and compares data for the last two years, corrective actions from incident reviews, deployment of video monitoring and staffing.</p> <p>b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each facility’s current year’s data and corrective actions.”</p> <p>c) Missouri DOC Annual Report – The 2022 and 2021 MODOC PREA Annual Reports were reviewed. The reports provided a table of data broken down by incident type and outcomes. This data can be used to complete the Survey of Sexual Victimization summary report.</p> <p>d) PREA Coordinator Interview – The PREA Coordinator said all information and data from incidents of sexual abuse and sexual harassment are retained in the Investigative Reporting Intelligence System.</p> <p>f) PREA Coordinator Interview – The PREA Coordinator said he uses the data and incident information for substantiated investigations from the Investigative Reporting Intelligence System to complete the Survey of Sexual Victimization when it is requested.</p> <p>Document Review – the Survey of Sexual Victimization Summary was provided for 2021 and 2022. All incident types were reported for the Missouri DOC facilities.</p> <p>The facility meets the provisions of this standard based on information from interviews, documents and policies reviewed.</p>

115.288	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a-b) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states “Agency Report: The PREA manager shall prepare an annual report compiling each</p>

	<p>facility's current year's data and corrective actions. a. The report shall include: (1) a comparison with prior year's data, (2) corrective actions, and (3) an assessment of the department's progress in addressing offender sexual abuse."</p> <p>2021 & 2022 PREA Annual Report - The MODOC PREA Annual Report includes a trend analysis of the data, a comparison of data from 2013 to 2022 and a summary of ongoing corrective actions.</p> <p>Agency Head - The Division Director said incident data is used to assess and improve housing assignments, video monitoring and staffing levels. Additional training is provided to staff through PREA Unit staff speaking at basic training courses.</p> <p>PREA Coordinator - The PREA Coordinator said the annual report compares data since 2013 and summarizes ongoing corrective actions.</p> <p>c) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The department's annual PREA report shall be made available to the public on the department's internet website."</p> <p>Agency Head - The Division Director said the Director approves the report prior to posting it on the department's website.</p> <p>Document Review - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. Though the Agency Head Designee said the reports are reviewed and approved by the Director, the reports are not signed by the Director either electronically or by signature. It is recommended that the annual report be signed by the Director or designee each year.</p> <p>d) Missouri DOC policy D1-8.13 Offender Sexual Abuse and Harassment states "The CAO or designee, PREA manager or department director shall edit specific material from the reports when publication would present clear and specific threat to the safety and security of a facility. The CAO or designee, PREA manager, or department director shall indicate the nature of the material edited."</p> <p>PREA Coordinator - The PREA Coordinator said personally identifying or confidential information about incidents are not included in annual reports.</p> <p>The facility and agency meet this standard based on interviews, documents and policies reviewed.</p>
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115.289	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>PREA Coordinator – The PREA Coordinator said the PREA incident information is securely stored in the Investigative Reporting Intelligence System (IRIS). Access to IRIS is limited to investigators, PREA Site Coordinators, Warden’s and other staff directly involved in incident investigation and review.</p> <p>Missouri DOC Annual PREA Report - The PREA Annual Reports from 2010 to 2022 were found posted on the MODOC PREA webpage at https://doc.mo.gov/programs/PREA. The last two years of PREA Annual Reports were reviewed and found to have a comparison of sexual abuse data from 2013 to 2022. The reports did not contain any personal identifiers.</p> <p>The facility and agency meet this standard based on the information from the PREA Coordinator interview and review of annual reports found on the MODOC PREA webpage.</p>
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115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>A review of the Missouri DOC website PREA page shows PREA audits are being completed on one third of the facilities per year. The Transition Center of Kansas City was during the last audit cycle. The PREA Coordinator stated during his interview, the Missouri DOC has been receiving PREA audits in all facilities during all audit cycles.</p> <p>This auditor was given access to all areas of the facility during the facility tour and provided with all documents requested.</p> <p>This auditor conducted interviews with residents in a private room.</p> <p>A notice of audit was sent to be posted six weeks prior to the onsite audit. The notice was posted throughout the facility six weeks prior to the onsite audit, notifying residents they could send confidential correspondence to this auditor. Pictures of the notice posting were sent on April 26, 2024. No letters were received prior to the onsite audit from residents.</p>

115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>A review of the Missouri DOC website PREA page found PREA audit reports for all</p>

	<p>MODOC facilities from 2014 to 2023.</p> <p>The agency has been posting all final audit reports on its website as required by this standard.</p>
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Appendix: Provision Findings		
115.211 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.211 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities?	yes
115.212 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.212 (c)	Contracting with other entities for the confinement of residents	
	If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in	na

	emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
115.213 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.213 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)	na
115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing	yes

	staffing patterns?	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.215 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female residents?	no
115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enable residents to shower,	yes

	perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes
115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.215 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.216 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes

	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.216 (b)	Residents with disabilities and residents who are limited English proficient	

	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.216 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	yes
115.217 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of	yes

	force, or coercion, or if the victim did not consent or was unable to consent or refuse?	
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?	yes
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes
115.217 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.217 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
115.217 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.217	Hiring and promotion decisions	

(f)		
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.217 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.217 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.218 (a)	Upgrades to facilities and technology	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012 or since the last PREA audit, whichever is later.)	na
115.218 (b)	Upgrades to facilities and technology	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the	na

	agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	
115.221 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.221 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.221 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.221 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.221 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).	yes

115.222 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.222 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).)	na
115.231 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with	yes

	residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training,	yes

	does the agency provide refresher information on current sexual abuse and sexual harassment policies?	
115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes

	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes
115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent	yes

	the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	
115.234 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a).)	yes
115.235 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	na
	Do medical and mental health care practitioners contracted by	yes

	and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	
115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.241 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:	yes

	Whether the resident's criminal history is exclusively nonviolent?	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes
115.241 (e)	Screening for risk of victimization and abusiveness	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes
115.241 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.241 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess a resident's risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?	yes
115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.241 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes

	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.242	Use of screening information	

(f)		
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.251 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.251 (b)	Resident reporting	

	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve	yes

	with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	
115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf	yes

	of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.252 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to	yes

	alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	
115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes
115.253 (b)	Resident access to outside confidential support services	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.253 (c)	Resident access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.254 (a)	Third party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.261 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

	information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.261 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.261 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.261 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.261 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.263 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.263 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.264 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate,	yes

	washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.264 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.265 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.266 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.267 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes

	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.267 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.267 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.271 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes
115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.271 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.271 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.271 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.271 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.271	Criminal and administrative agency investigations	

(h)		
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.271 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.271 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	na
115.272 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.273 (a)	Reporting to residents	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency	na

	request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
115.273 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform	yes

	the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.273 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.276 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.276 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.276 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.277 (a)	Corrective action for contractors and volunteers	

	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.277 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
115.278 (a)	Disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.278 (b)	Disciplinary sanctions for residents	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
115.278 (c)	Disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.278 (d)	Disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a	no

	condition of access to programming and other benefits?	
115.278 (e)	Disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.278 (f)	Disciplinary sanctions for residents	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.282 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information	yes

	about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	
115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.283 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive	na

	information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	
115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.286 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.287 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287	Data collection	

(c)		
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.287 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.287 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.287 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.288 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.288 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.288 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.288 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.289 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes
115.289 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.289 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with residents?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the	yes

	same manner as if they were communicating with legal counsel?	
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes